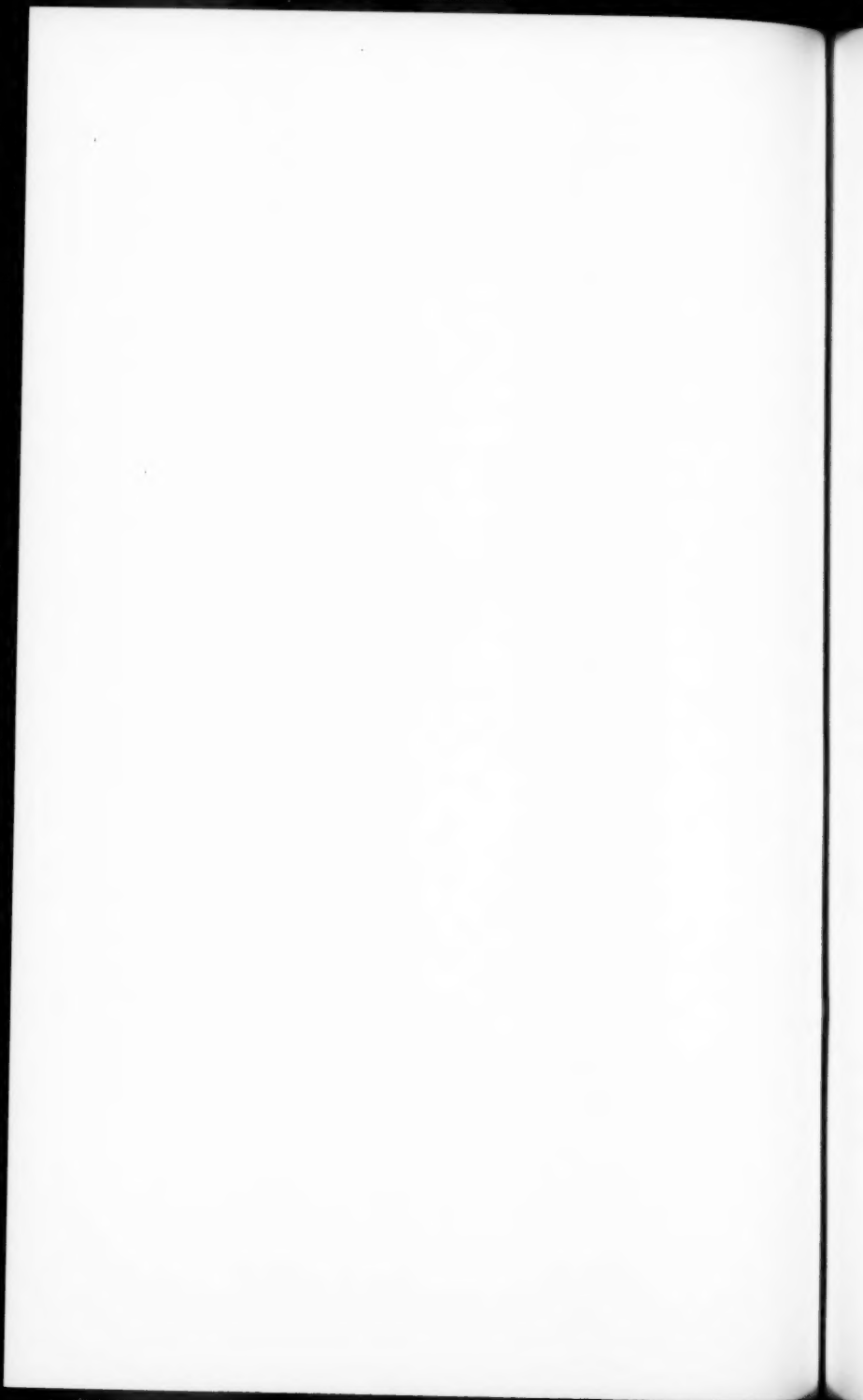


THE
PSYCHIATRIC QUARTERLY
SUPPLEMENT

Volume 10

1936





THE PSYCHIATRIC QUARTERLY SUPPLEMENT

Volume 10

RICHARD H. HUTCHINGS, M. D., Editor

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DR. FREDERICK W. PARSONS, *Commissioner*

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MINUTES OF THE QUARTERLY CONFERENCE

DECEMBER 21, 1935

The Quarterly Conference of the State institution visitors and superintendents with the Commissioner of Mental Hygiene, was held at the New York State Psychiatric Institute and Hospital, New York City, December 21, 1935.

Present—

- FREDERICK W. PARSONS, M. D., Commissioner of Mental Hygiene.
LEWIS M. FARRINGTON, secretary, Department of Mental Hygiene.
DONALD W. COHEN, M. D., child guidance psychiatrist, Department of Mental Hygiene.
PHILIP SMITH, M. D., chief medical inspector, Department of Mental Hygiene.
A. E. BARTON, M. D., medical inspector, Department of Mental Hygiene.
R. R. STEEN, M. D., medical inspector, Department of Mental Hygiene.
R. G. WEARNE, M. D., acting medical inspector, Department of Mental Hygiene.
MRS. ELEANOR C. SLAGLE, director, bureau of occupational therapy, Department of Mental Hygiene.
WM. C. GARVIN, M. D., superintendent, Binghamton State Hospital.
ISAAC BALDWIN, visitor, Binghamton State Hospital.
MRS. CHARLES R. SEYMOUR, visitor, Binghamton State Hospital.
MRS. CHARLES F. JOHNSON, Jr., visitor, Binghamton State Hospital.
C. H. BELLINGER, M. D., superintendent, Brooklyn State Hospital.
JOHN B. BYRNE, M. D., visitor, Brooklyn State Hospital.
MRS. CHARLES J. DRUHAN, visitor, Brooklyn State Hospital.
J. A. PRITCHARD, M. D., superintendent, Buffalo State Hospital.
MRS. DAVID DIAMOND, visitor, Buffalo State Hospital.
DAVID CORCORAN, M. D., superintendent, Central Islip State Hospital.
MRS. E. E. HICKS, visitor, Central Islip State Hospital.
MRS. LOUIS WENDEL, visitor, Central Islip State Hospital.
MRS. ARTHUR F. J. REMY, visitor, Central Islip State Hospital.
HENRY P. ROBBINS, visitor, Central Islip State Hospital.

- DELMER D. DURGIN, M. D., first assistant physician, Central Islip State Hospital.
- A. G. RODGERS, M. D., director of clinical psychiatry, Central Islip State Hospital.
- S. L. SMALLEY, M. D., senior assistant physician, Central Islip State Hospital.
- GEORGE W. MILLS, M. D., superintendent, Creedmoor State Hospital.
- JOHN H. TRAVIS, M. D., first assistant physician, Creedmoor State Hospital.
- E. V. GRAY, M. D., superintendent, Gowanda State Homeopathic Hospital.
- JOHN R. ROSS, M. D., superintendent, Harlem Valley State Hospital.
- H. A. LABURT, M. D., director of clinical psychiatry, Harlem Valley State Hospital.
- MISS MARGARET E. MACK, visitor, Harlem Valley State Hospital.
- R. P. FOLSOM, M. D., superintendent, Hudson River State Hospital.
- WIRT C. GROOM, M. D., first assistant physician, Hudson River State Hospital.
- JOHN Y. NOTKIN, M. D., director of clinical psychiatry, Hudson River State Hospital.
- S. C. WOLFF, M. D., senior assistant physician, Hudson River State Hospital.
- CHARLES S. PARKER, M. D., superintendent, Kings Park State Hospital.
- P. H. STEEN, M. D., senior assistant physician, Kings Park State Hospital.
- WILLIS E. MERRIMAN, M. D., superintendent, Manhattan State Hospital.
- NOBE E. STEIN, M. D., senior assistant physician, Manhattan State Hospital.
- W. W. WRIGHT, M. D., superintendent, Marcy State Hospital.
- ALBERT V. MOORE, visitor, Marcy State Hospital.
- HARRIET M. DOANE, M. D., visitor, Marcy State Hospital.
- ROBERT WOODMAN, M. D., superintendent, Middletown State Homeopathic Hospital.
- W. J. TIFFANY, M. D., superintendent, Pilgrim State Hospital.
- H. BLAKE GILMORE, visitor, Pilgrim State Hospital.
- KENNETH KEILL, M. D., first assistant physician, Pilgrim State Hospital.
- H. BECKETT LANG, M. B., director of clinical psychiatry, Pilgrim State Hospital.
- R. E. BLAISDELL, M. D., superintendent, Rockland State Hospital.
- Mrs. GIACOMO ZAMBONI, visitor, Rockland State Hospital.

Mrs. JOHN STRATTON O'LEARY, visitor, Rockland State Hospital.

H. M. CHANDLER, M. D., first assistant physician, Rockland State Hospital.

L. P. O'DONNELL, M. D., director of clinical psychiatry, Rockland State Hospital.

Mrs. A. KLAPPERT, Rockland State Hospital.

PAUL G. TADDIKEN, M. D., superintendent, St. Lawrence State Hospital.

Mrs. MARY S. GOODALE, visitor, St. Lawrence State Hospital.

Mrs. GEORGE D. HEWITT, visitor, St. Lawrence State Hospital.

Mrs. JULIUS FRANK, visitor, St. Lawrence State Hospital.

Mrs. JAMES F. AKIN, visitor, St. Lawrence State Hospital.

Miss HELEN V. CLUNE, principal, school of nursing, St. Lawrence State Hospital.

ROSS D. HELMER, M. D., first assistant physician, Utica State Hospital.

Miss MARY I. DOOLITTLE, visitor, Utica State Hospital.

HARRY J. WORTHING, M. D., superintendent, Willard State Hospital.

Mrs. EMMONS L. WILLIAMS, visitor, Willard State Hospital.

Mrs. WM. J. EARLEY, visitor, Willard State Hospital.

MARY F. BREW, M. D., assistant director, Syracuse Psychopathic Hospital.

C. O. CHENEY, M. D., director, Psychiatric Institute.

H. W. POTTER, M. D., research associate in psychiatry, Psychiatric Institute.

A. FERRARO, M. D., research associate in neuropathology, Psychiatric Institute.

MEYER M. HARRIS, M. D., research associate in internal medicine, Psychiatric Institute.

NICHOLAS KOPELOFF, Ph. D., research associate in bacteriology, Psychiatric Institute.

ERWIN BRAND, Ph. D., research associate in chemistry, Psychiatric Institute.

CARNEY LANDIS, Ph. D., research associate in psychology, Psychiatric Institute.

JOSEPH R. BLALOCK, M. D., senior physician (psychiatrist), Psychiatric Institute.

WILLIAM A. HORWITZ, M. D., junior physician (psychiatrist), Psychiatric Institute.

S. E. BARRERA, M. D., research assistant in neuropathology, Psychiatric Institute.

- RICHARD BLOCK, Ph. D., research assistant in chemistry, Psychiatric Institute.
- H. R. KLEIN, M. D., resident in psychiatry, Psychiatric Institute.
- T. W. FORBES, Psychiatric Institute.
- R. POLIACK, Psychiatric Institute.
- BLAKELEY R. WEBSTER, M. D., superintendent, Dannemora State Hospital.
- J. K. PETIT, M. D., first assistant physician, Letchworth Village.
- EDWARD J. HUMPHREYS, M. D., director of research, Letchworth Village.
- ROGER REID, M. D., medical interne, Letchworth Village.
- G. W. T. WATTS, M. D., medical interne, Letchworth Village.
- ELAINE F. KINDER, Ph. D., psychologist, Letchworth Village.
- GEORGE A. JERVIS, Letchworth Village.
- MARIELLA Z. MENZEL, Letchworth Village.
- C. L. VAUX, M. D., superintendent, Newark State School.
- MRS. HARRIET THOMPSON, visitor, Newark State School.
- JAMES G. RIGGS, visitor, Rome State School.
- Professor R. W. FOLEY, visitor, Rome State School.
- MRS. EDWARD HAMMANN, visitor, Rome State School.
- MRS. WM. P. RAYLAND, visitor, Rome State School.
- C. E. ROWE, M. D., superintendent, Syracuse State School.
- WILLIAM ALLAN DYER, visitor, Syracuse State School.
- HARRY C. STORRS, M. D., superintendent, Wassaic State School.
- WILLIAM L. RUSSELL, M. D., New York Hospital, New York City.
- SAMUEL W. HAMILTON, M. D., assistant director, Bloomingdale Hospital.
- EDWARD B. ALLEN, M. D., senior resident physician, Bloomingdale Hospital.
- M. J. THORNTON, M. D., physician in charge, White Oak Farm, Inc., Pawling, N. Y.
- HENRY W. LLOYD, M. D., physician in charge, West Hill, New York City.
- ELEANOR F. ASTLEY, West Hill, New York City.
- W. B. CORNELL, M. D., Albany, N. Y.
- MRS. ISAAC BALDWIN, Elmira, N. Y.
- W. H. FREESE, Cairo, N. Y.
- KURT GOLDSTEIN, M. D.
- MRS. CHAS. R. MOESON, Atlantic Beach, N. Y.

Conference was called to order at 10 o'clock by the Chairman.

The CHAIRMAN: The first on the program is an address of welcome by Dr. Cheney.

Dr. CHENEY: As usual I have no expectation of making you a long address of welcome. I simply wish to say that we are glad to have you here again. It is always a pleasure to have the December Conference here and we hope you will have a very profitable and enjoyable and satisfactory meeting this morning.

If there are any questions anyone wishes to ask or if any member of the Conference wishes to go through the Institute while you are here, we shall, of course, be glad to answer any questions and show you what we can of the Institute.

The CHAIRMAN: It is always pleasant to respond to the greeting of Dr. Cheney. His welcome is shown both by acts and words and I am sure I express the opinion of the Conference when I say it is a delight to come to the Institute each December and it is very nice of you to have us.

We will now proceed with the regular program. The first paper is one by Dr. Cheney, entitled, "Trends in Psychiatric Research."

(Dr. Cheney's paper will appear in the PSYCHIATRIC QUARTERLY for April, 1936.)

The CHAIRMAN: Dr. Cheney's very interesting and instructive paper is now before you for general discussion. It is very informative to come here each year and have the last word spoken on the present status of psychiatric research. We are particularly fortunate in having Dr. Cheney, as spokesman.

Is there any discussion on Dr. Cheney's paper?

Dr. Cheney is to be complimented. He has said the last word so effectively that no one can add anything.

Do you wish to say anything in closing?

Dr. CHENEY: I thought perhaps it might be of interest to the members of the Conference who read in the newspapers a short time ago, a statement alleged to have been made by Dr. Mayo of Rochester, Minnesota, particularly in regard to a "cure" for insanity and dementia præcox. I wished to learn what Dr. Mayo had in mind and I wrote him and asked him whether he could inform me, indicating that we were very much interested in research along this line, particularly dementia præcox, and that we should be glad to carry out the research in cooperation with him or independently. Dr. Mayo replied that at a meeting of the Inter-State Post-graduate Medical Association of North America in Detroit, he discussed goiter and the changes in its treatment. He stated that in the discussion

he said that cretinism due to lack of thyroid, and myxedema due to a non-working thyroid, if discovered early, could be remedied by continuous medication with thyroid extract; that Raynaud's disease and Buerger's disease, in the early stages, could be cured by operation on the cervical, thoracic, and lumbar spinal ganglia (the possibility of benefit from operation being proved beforehand by the effects of drugs); that cerebral disturbance, resulting from spasm in circulation, likewise should be benefited, in the early stages, by operation and that it would take five years more of investigation and research before this could be determined. The operation would not be of value in congenital lack of development, or in cases with long standing changes in circulation. From his letter therefore, it appears that he made no reference to dementia præcox or its cure, and apparently the newspaper reports are misleading. I give you this information as of possible interest to those who may have had inquiries regarding Dr. Mayo's alleged method of treatment, particularly of dementia præcox.

The CHAIRMAN: Dr. Cheney conveys the implication that it is not always wise to believe everything one reads in the newspapers.

The next paper on the program is "Report of the Study of the Boards of Visitors of the Institutions in the Department of Mental Hygiene," by Professor Foley of Colgate University.

(The text of Professor Foley's paper appears on page 42.)

The CHAIRMAN: Very frequently papers read before your august body do not lend themselves to discussions. Ladies and gentlemen of the boards of visitors, this is your opportunity. I hope the discussion on Professor Foley's paper will be widespread. Will Mr. Dyer start the discussion?

Mr. DYER: After such an interesting and eloquently descriptive paper, it is rather difficult to add anything. The lack of reaching a conclusion by Professor Foley makes me think of the "Mother Hubbard" which "covers everything and touches nothing."

I believe firmly in the value of these boards of visitors but what that value may be depends upon the attitude of the members. We know that a board member can be of very great use to his superintendent and that his aid is not confined to attendance on board meetings.

Our own board is constantly in touch with our superintendent and the institution and its members visit the school on other days than meeting days. Our superintendent has been very sympathetic to it and has sought our advice, and many times, we have been able to interpret the school and its aims and that of the department, to the public and that has been to the advantage of both institution and department.

Our superintendent has done one thing which, I believe, has not been mentioned. At least twice, he has given us, in the past year, lectures on subjects pertaining to the institution and its problems which have been both interesting and valuable to us and we were loath to leave after his paper was read and discussed.

I believe contact of board members with the members of other boards and other institutions can be of great value to all concerned. I like the comments as to board relations made by our Commissioner. If these are followed in a cooperative spirit, there should be no question of the value of the boards to the State, to the public and to the institutions themselves. It is all a matter of the interest which each individual member takes. If he is honestly interested and tries to do all he can and does it in a cooperative way, there will never be any trouble at all. I am personally very deeply interested in this whole problem and am always glad to come to these conferences from which I assure you I get much of worth. All that I can do for our school, I am glad to do and I do not believe in members of the boards being paid for their services.

The CHAIRMAN: Is there further discussion?

Dr. BYRNE: I think the paper read by Professor Foley was very interesting but as Mr. Dyer says, it does not quite come to the point. I believe it is of value to get together. I do not know why the law was changed and why some of the powers were taken away. I came in one year as a manager and the first thing I knew I found I was only a visitor. Later on, I attended some meetings of the boards when we thought something might be done about it but I have heard nothing more regarding the matter until this paper, which, however, may be responsible for a change, I don't know. When I heard that the law had been changed, taking away the power of the board to have a voice in the appointing of a superintendent, I was somewhat disturbed as to the outcome. We have a good Commissioner now and are sure we will have good superintendents, but should we have a new commissioner he might not like our superintendent and make things very unpleasant. We know what we now have but we don't know what we may get. In the event of a new commissioner it might not be handled in the way it was when our last superintendent was appointed. At that time Commissioner Parsons came to us and held a conference with the board, and we discussed the various candidates eligible for appointment with Dr. Parsons and were allowed to have a voice in the selection of a superintendent. The man who was appointed has been with us about four months and has made himself endeared to the Brooklyn State Hospital.

The name "Manager" sounds perhaps somewhat better than the word "Visitor," and while a few powers may have been taken away from us, what does it matter? I understand that at one time the board had the power to appoint a superintendent but that power has been taken away. I understand also that if a superintendent was up on charges he was given a hearing before the board. It is evident that that power has now been taken away from the board and vested by law in the Commissioner, thereby virtually placing the power of removal in one man instead of in the board.

I believe there should be harmony between the superintendent and the board of visitors. I, as a doctor, visit the hospital very often. Because of the frequency of my visits I do not record them. This was suggested at one time, later someone said it was not necessary. On the whole I think we get along very well.

Since July 1, there have been certain press notices regarding one of the hospitals which have been very disturbing. Had the names of the visitors appeared in print, we would have been severely criticized by our friends in the borough, which criticism we would not have liked. I think we are running along very well in our hospital and I don't believe we need any changes. On the whole, I am perfectly satisfied as the matter now stands.

Mr. Low: Last year as you know we formed an association of visitors, the major purpose of which was to reinstate the name of the board of managers and also procure the former powers held by the board. We sent questionnaires around to the different institutions and we had nine replies in the affirmative; nine in the negative, two were neutral and two did not reply at all. Because of this showing we dropped the entire matter. I think it is a very poor and sad commentary on the attitude of the boards of visitors that two did not reply at all. The final poll of nine for the change and nine against, naturally precluded our going any further with it and we bowed to the judgment of Dr. Parsons in this matter. The wisdom of discontinuing any efforts in this direction is borne out by the statement just made by Dr. Parsons concerning the position and function of the boards of visitors.

I would like to say one thing more. Would it be possible to create some sort of an organization whereby there may be an interchange and dissemination of information of the activities of the various boards of visitors from the different hospitals. I submit that as a question.

The CHAIRMAN: Would you care to go further and include the boards of all the State institutions?

Mr. Low: Whatever is necessary.

Mrs. FRANK: I feel very presumptuous to say anything when we have with us here today such a capable person who has been on the board of visitors of the St. Lawrence State Hospital for 34 years. I refer to Mrs. Goodale. She has done much excellent work as a member of board of visitors, board of managers, and now again board of visitors.

I quite agree that it does not make any difference under what name we function and I know that most of us feel the same. We all aim to assist the superintendent and hospital in any way we can.

What I would like to understand is, are we needed and does the State feel that we get enough out of these meetings to pay for our coming? I think most of us who are on the boards of visitors are on because we feel we have something definite to contribute; something we want to do. For instance, take the Quarterly Conference, are these Conferences a privilege for us to attend and is it a duty for us to attend? Are we wanted or should we feel we are just invited as a courtesy? Some feel we should not make the State spend this money for our expenses. Personally, I feel only people should be on the boards of visitors who want to serve; who feel they can give something; who are truly interested in the work. It is not very gratifying to serve for a number of years and then have another political party come in and change things about and put people on the board who have no interest whatever. We have a fine feeling on our board and Dr. Taddiken, our superintendent, has been most cooperative and has always made us feel we are welcome. I think it would be a good thing to have us really know whether we are wanted. Do you think the conferences are giving us something that is going to make us better members of the boards of visitors?

The CHAIRMAN: I can answer your direct question with equal directness. You are welcome. You are not only to come for what we can give you but what you can give us.

Mr. DYER: If a board is carefully selected with various types, perhaps a business man, a physician, a lawyer, and so forth, so as to give to the institution varying talents, I feel such a board can be of great value to the superintendent, who may be puzzled at times by problems coming up upon which he would like specialized advice, and being ready to give such, is one of the real functions of a board, and the superintendent can feel he can always have it, if a board is well selected as it should be.

I can only assume, from my experience on our own board, that our members have been selected for these various reasons. I am a business man, so-called, and if a business problem comes up to puzzle our Dr. Rowe, or did in the past, his predecessor, Dr. Cobb, I am and always have been perfectly willing, out of what experience I may be fortunate enough to possess,

to talk the matter over with him and perhaps give him something of value from that experience. I believe it is one of the functions of the boards to help the superintendent in his many problems.

It makes no difference to me, as a member of the board, what that board is called, whether "board of visitors," "board of managers," or "board of trustees." I feel it all depends on what you are willing to give in cooperation with the superintendent, who is and should be the administrator and manager of his institution, and also in cooperation with the department itself. It is patent that the boards should not be managers under present conditions, yet, notwithstanding, they have really quite broad powers which they may use to the good of all, if they do it wisely and in a friendly spirit. It all depends on what one is willing to give.

I want to say, right here, to you, Dr. Parsons, our relations with you and yours with us have always been most delightful and if I never got anything more from my service than to know and work with you, I would be quite satisfied with my experience as a member of a board of visitors. And may I add that that goes also for the always most agreeable acquaintance it has been my good fortune to have with you, ladies and gentlemen of this conference.

Mr. ROBBINS: I am sorry that I have to leave as I have an appointment, but should like to offer a resolution of thanks to Professor Foley for his very excellent paper. We at Central Islip are proud of our superintendent and of our institution. Nevertheless, Professor Foley has given us stimulus and something to think about, and I hope, therefore, that this meeting will adopt such a vote of thanks.

Miss MACK: I just want to say a few words in this connection. The greatest value coming out of these conferences, I think, is this open discussion. We are permitted to hear the opinions of the different superintendents and the members of boards of visitors. What difference does it make what we are called? This grand old lady has been on the board when it was called board of managers and now she is on the board of visitors and she does not care what she is called. She goes on just the same.

I feel as a member of a board, a very young member of the board, that the greatest thing that can come out of it is our opportunity to defend those who cannot speak for themselves. Personally it does not matter to me whether I am called board of managers or board of visitors, it makes no difference to me. If Dr. Parsons were to live forever, I would have no fear. There is no doubt in my mind but that Dr. Parsons gives to each and every institution in the State the very kindest, best and keenest thought to all their problems.

I want great gain to come out of this paper. We have come out in the open and expressed ourselves. A few years ago I went to the then Governor of the State; he is now President of the United States, about the board of managers and I sat in his study and he said, "Well, Maggie, what would you like to be called," and I said "I don't know." I said, "Mr. Governor, what do you think we should be called?" He said, "Well, my father was a manager of the Hudson River State Hospital when I was a little boy, and he went in the open market to buy coal for the institution. The managers could buy things in those days, and when they found out he was getting the coal for the hospital at a cheaper rate, they did not like it." So you see, as Dr. Parsons says, we are lay members. We cannot always decide important questions, and sometimes we do not have the opportunity to decide them. But, what I am grateful for is being called into the service, men and women to give the best we have in us and to do all we can. We meet people in all walks of life on these boards of visitors. And, it is only by having people in all walks of life, do we have the great opportunity to serve, and do what we started out to do, and that is to protect these wards of the State who cannot speak for themselves.

The CHAIRMAN: I think the grand old lady should be heard from.

Mrs. GOODALE: Thank you, Dr. Parsons. I have been 34 years on the board. I came in 1902 when it was called the board of visitors. I was on the first board and since that time have served 16 years as manager and 17 years as a visitor and personally I can say (I made this statement at a meeting held at the Waldorf, and I repeat it here) that I have been through both managers and visitors and I find it very difficult to know which is best, whether manager or visitor because everything went on in the same way.

Of course, in 1902, things were much more informal, and all reports were written in long hand and sent to Albany, and I can say that they were just as cordially received and given just as much attention as when we were called managers. That has been my experience with the State hospitals and the relation has been absolutely cordial.

I have been under three superintendents at the St. Lawrence State Hospital; Dr. Mabon, Dr. Hutchings and Dr. Taddiken, and I can truthfully say that in all the years there has never been the least bit of friction and nothing but the most delightful situations and no unpleasantness, whether manager or visitor. Thank you, Dr. Parsons.

The CHAIRMAN: Is there further discussion of Professor Foley's paper?

Mr. DYER: I was requested by my college to represent it at the inauguration of president day of Union College some three or four years ago and I found myself the only layman in a group of college presidents and college officials.

I sat with some of the presidents and deans of several colleges and made the statement that I wasn't sure but that I was a little out of place in such distinguished company, so they, in fun, promptly made me president of a fictitious institution, that I might feel more at ease in associating with them.

I wish to say that I have appreciated more than I can tell you, the acquaintance and the association at these Quarterly Conferences with you gentlemen who are superintendents of these great institutions and with the members of the various boards of visitors—but am still a layman among you, unless you follow the action I have just cited.

However, our Commissioner asked me, without warning, to discuss this subject of "Board of Visitors" in response to Professor Foley's paper—and you will please blame him and not me for my remarks.

The CHAIRMAN: Is there further discussion?

Professor Foley's paper was timely, he raised topics of considerable interest and the discussion indicates that he has aroused your emotions. Certain dissatisfactions with the title of "visitor" and of your lack of responsibility have been expressed. They require departmental comment but I think of the Department of Mental Hygiene as the institutions and those in immediate control, the board, the central office and of myself as the spokesman of the group. I therefore speak as one of you and not as a detached individual.

As I interpret the sentiment of the department as a whole, influenced as it must be by the general policy of the State, I cannot see that there is any hope of your having enlarged responsibilities to the extent of having restored to the boards the powers and responsibilities which were theirs when there was no central government control. It is the present theory that the Governor is the chief administrative officer, that in matters of institutional administration, he delegates authority to persons appointed by him for a term, co-terminous with his, or shorter if he sees fit. The head of the department establishes policies which are to be carried out through the administrative head of the institution, who, though protected by civil service laws, is insubordinate if he declines to do as directed. So that capricious directions may not rule, what the Commissioner may do and what the superintendent may do, are specified by statute. To hope to introduce into that direct chain of responsibility another group, not always appointed by the Governor then in office, not answerable to him, outside of direct control, is an expectation not likely to be realized and I think you should face that fact. Fifty years ago when the institutions in this department were few, when there was little, if any, Albany control, the institutions were managed by local groups. They selected the superintendent without civil service

limitations, they made hospital rules, they came to Albany and dealt with legislative committees on appropriations with the result that not always was there an equal distribution of money. The money was spent without real supervision, bills were perfunctorily audited by the board and paid by a local treasurer. After the obligation was incurred payment had to be made. The board could do nothing else. All of this is in direct opposition to the fiscal laws of the State, and there is no prospect of the creation of the chaos which would result from 24 different policies in the 24 institutions on which we have board representation.

The name "visitor" was given to the boards of all types of State institution by a charter revision committee, composed of distinguished citizens, headed, I believe, by Charles Evans Hughes. It was not selected by those who then comprised the State Hospital Commission. To the title about half of the board members side with a few violent objects. The other half do not care, asking only an opportunity to serve in a humble capacity. Until there is a stronger desire on the part of a large majority I venture the opinion that the name will not be changed. If it is changed a title should be adopted which will describe the legal powers now yours. If you ask to be managers in fact as well as in name you are sure to be disappointed.

Before you ask for enlarged powers you should consider how you discharge those which you now have. I do not question your ability but you have your own affairs and a State institution cannot be "managed" during the course of a brief monthly meeting. When your statutory powers interfere with the speedy operation of the institution then they should be abridged. The Mental Hygiene Law until recently provided that disciplined employees could appeal to the board before going to the court. No other group of civil service employees has a corresponding right and certain members lend a willing ear to the stories of disgruntled employees with resulting damage to discipline, to the embarrassment of the department and to the deputies who defended the institution on behalf of the Attorney-General, when a dishonest cook sought to be restored to his position. In his efforts he had the sympathy of some of the board members.

A reference to disharmony was made by one speaker. I am not conscious of disharmony. My relations with you are most pleasant and to me you have been uniformly gracious. Not one unpleasant incident has occurred in my 10 years association with you as a group. Twice I objected to actions on the part of two individuals. One led to his resignation. Once I felt obliged to reprimand a board member, a physician, for accepting money from the relatives of a patient, promising to promote that patient's welfare.

He said the transaction was not forbidden by the Mental Hygiene Law, but that oversight was speedily corrected.

The value of boards has been questioned. Of their worth, I have no doubt. They are an insurance against arbitrary action, they bring a fresh point of view into institutional management and they can, and do, interpret the institution to the community. Without the boards the institutions could function. Had they never been established I would not ask for them but as they are traditional in the department I should not like to be without them, although that was seriously considered not long ago when in another department the superintendent and the board behaved most injudiciously. Members are very welcome at the conferences. They contribute largely to the completeness of the gatherings, we learn from them and I hope they go away richer than they came. I shall see if we cannot arrange that at the next conference the boards may have a meeting all their own.

I now ask Professor Foley to close the discussion.

Prof. FOLEY: Preparing this paper was interesting and enjoyable. There was a large amount of material in the board reports and in the questionnaires. It was not possible to present in so brief a paper every board activity listed or every shade of meaning in questionnaire answers. It is quite likely that some of you may not find your board activities or your answers to questions as accurately reported as you may desire. Perhaps many important points are unintentionally omitted. The materials studied seem to point to rather definite trends in thought about present and future board activities and possibilities. Perhaps the paper will be of assistance to administrative officers and board members and others toward clearer thought about boards in the institutions in the Department of Mental Hygiene. As an interested observer and student of some phases of the activities and interests of the department, it pleases me to be able to make this report as a contribution, to be added to other contributions which many of you are constantly making, to our common thought about the work with which we are all more or less intimately connected.

The CHAIRMAN: We will pass on to the next paper on the program, which is one entitled, "Occupational Therapy—Past, Present and Future," by Mrs. Eleanor Clarke Slagle.

Mrs. Slagle reads paper.

The CHAIRMAN: Mrs. Slagle's very splendid paper is before you for discussion.

Mrs. Slagle, I fear something is going to happen to your paper similar to that which was achieved by Dr. Cheney. You have dealt with your topic so completely no one has anything to add.

Does anyone care to discuss Mrs. Slagle's paper?

There appearing to be no discussion we will pass on to the next, a paper entitled, "Some Observations and Experiences with Family Care of Psychiatric Patients," by Dr. Harry A. LaBurt of the Harlem Valley State Hospital.

(The text of Dr. LaBurt's paper appears on page 33.)

The CHAIRMAN: Dr. LaBurt's paper is now before you.

Dr. Woodman, as chairman of the special committee on family care, will start the discussion.

Dr. WOODMAN: I think the Harlem Valley State Hospital and Dr. LaBurt are to be congratulated on this paper which has been of great interest to me as introducing some new elements in family care which I had not heard about before. My idea of family care, as I have had opportunity to see it elsewhere, was obtained by making a visit to patients boarding out in Massachusetts. There nearly all were supported at public expense, although in some instances at private cost. This matter of infiltrating the better patients of the institution into the community for wages in the manner Dr. LaBurt and the Harlem Valley State Hospital staff have designed is something I have not seen elsewhere as a measure of family care. They are apparently doing a very good job, getting patients out who should be out, and we are all having more difficulty in getting patients back in the community than we had a few years ago when remunerative positions could be quite readily secured for many patients in this class.

We have been trying to do our bit in getting the boarding out practice started in Middletown, but our practice has been nothing like that reported by Dr. LaBurt. When I came away two days ago there were 43 out. Our experience has been that it is easy to find places for women, but not for men. The women in the household do not want men around. Perhaps that is because we have been putting out patients in larger groups. Our families are taking patients definitely as a boarding proposition. They are nice people who need the money and they are not taking patients as workers. The general policy has been to leave psychotic workers in the institution, where we need them badly, and offer them the usual inducements. We have 5 homes with 1 patient each, 4 with 2, and 5 homes with 6 patients each. Seven of the 43 patients are supported by private funds; 36 by State grant.

I have been surprised at the number of applications received for boarders, from very good homes and very nice people. We have been a little surprised also at the good quality of the care our patients get and how well they like their places. There has been at Middletown little in the way of bringing patients back. True, one patient, "Mary B.," using Dr. La-

Burt's system of naming, was put in a rather remote house where she remained three or four weeks. She was dissatisfied, however, so one day went into the parlor, removed two dishes from the shelf, went outside and smashed them. She had said she wanted to come back, and she is back, and when asked if she wants to go away again she says, "No," and that it was too lonesome. Most of our experience has been the other way about. One woman, nearly 80 years old and 27 years in the hospital, went out to the first boarding home. When she had been there a week I went to see her. I knew her very well. There was a look of consternation on her face when she said, "Doctor, did you come to bring me bad news? I thought you had come to take me back." I was a little touched by the old lady's view of the situation.

Sometimes we have people getting wages like those Dr. LaBurt speaks about but we have not counted them among our persons boarding out. A retired head gardener, who has bought a farm nearby and who took two men from the hospital during the fall at \$20 a month and board, came in last week to see me and to tell me that his outfit could not support them at \$20 a month during the winter and that he thought \$7 would be about right. The social worker thought \$7 might be too much but we agreed on \$7 just the same. There are others of our patients getting wages but they are not counted as being in boarding homes. Only recently we began to count in family care patients supported outside with their own money or that of their relatives, and then only when they continue under our oversight.

In summary then, our experience since the first of July has been that there is a place for this family care system. How large a place we will know better as the plan evolves and with the further development of our experience.

The CHAIRMAN: For the benefit of those to whom this subject is new I may say that the department is disposed to extend to superintendents considerable discretion. We realize that in the boarding out of patients we are without real background. When we have attained some experience we will then set a uniform policy.

Dr. LaBurt, as Dr. Woodman has mentioned, included in his group an activity with which hospitals have previously dealt under parole systems. Under "family care" we should count only those psychotic patients not suitable for parole who are maintained by the State in family groups rather than in the institution proper.

Is there further discussion of Dr. LaBurt's paper?

Dr. SMITH: I just want to say a word on the subject of family care with reference to boarding out in families outside and the complications

which might arise in connection with the office of the medical inspector. We always hear about the successful colony at Gheel, and how that is managed, and how well the patients are cared for. Anyone who has passed through Gheel and seen the operation of that colony will agree that it is very successful. It operates to the comfort of the patients and they are cared for at a comparatively moderate compensation. For some of these patients the equivalent of four to eight dollars in American money is paid per month.

I think the success of family care depends largely upon the geography of the country in which it is undertaken. I do not think that in an urban community family care is very feasible. However, in rural communities, and especially if one goes to Gheel, which is a rural community, it is quite a success. We have tried it here in New York State. Dr. Vaux has been especially successful in Walworth. The rural community there is an approach to the conditions at Gheel in Belgium. In a rural community the patients are satisfied, they can do farm work, but you take patients and place them in surroundings where there is a great deal of excitement, I think the success will not be as good as in a community with rural surroundings.

Another reason why I am speaking about this matter of boarding out is that it has come in conflict with our department, that is, the medical inspector's department. A family may be keeping two, or three patients who are from a State hospital and another family may also have several who are not from a State hospital; the place is regarded as an institution and we insist upon having that family discharge the patients because the place is not licensed. I have advocated that we ought to take some steps in this respect, in regard to licensing or giving some kind of a permit to these places which keep patients voluntarily for hire. If a woman who is a trained nurse in the community is keeping two or three patients, and giving them good care, then why should she be prohibited from keeping patients when another one probably has not the same qualifications but receives patients from a State institution?

I am in favor of this boarding out plan. I think it is a great step forward to have these boarding homes. I think that a good many patients are far happier to be out of the institution, happy in different surroundings and happy to become a member of a family. As I said before, it ought to be limited largely to rural communities rather than to cities, as there patients cannot go out without attracting attention if they are psychotic, and it would be a great injustice for them to be indoors continually. However, there should be some regulations and standards under which such places

are permitted to operate and they should be under the jurisdiction of the department.

The CHAIRMAN: The possibilities of the idea were raised by Dr. Vaux of Newark. Perhaps he will tell us of the number and the care of the feeble-minded women that he has at Walworth.

Dr. VAUX: At Walworth, we started with the idea of having patients in a selected community where they would be close together, making it easy to supervise and care for them. We have increased the number recently to about 100 patients. This year we received \$20,000, but during the first month of the year we had that all contracted for and are still handicapped for lack of funds. We are very anxious to get more patients out. Boarding out a few patients does not prove anything. The question is, can you put patients out in sufficient numbers to make it worthwhile and make an actual saving in the construction costs? We feel we need to have several hundred out before we really can demonstrate anything in this way. I have seen boarding homes in Massachusetts and in this State of a great many different kinds, some of them in isolated places, and they all seemed pretty satisfactory. So if you are going to get out great numbers, you should not be too restricted as to method.

I think Dr. LaBurt opened up a number of possibilities, showing that the project should be kept very elastic in its beginning, so that each hospital can work it out in its own way. The training school he has evolved to prepare patients to go out seems a very good thing. Perhaps he would not have had it except for family care. His patients who are receiving wages, cannot strictly be classed as in boarding homes. Board is not being paid for them. Such patients are usually called "paroles," but evidently these patients were unable to get out of the hospital without the efforts made for family care. We have a similar group. I do not think it necessary to limit the title too much. The important point is to get them out of the hospital.

The question Dr. Smith raises would scarcely apply where only one or two were placed in a home, which is the way we have tried to do.

Dr. ROSS: Dr. LaBurt, in his paper, has not particularly stressed the fact that the majority of these cases which have been placed would ordinarily have remained in the hospital under State care if someone had not been found who would be responsible for their supervision. It was felt that we should proceed rather carefully in our community. The hospital has not been there many years; people have a fear of insanity and the insane person, and it was felt that as an educative measure, it would be better if we first took the better type of patient and accustomed the community to hav-

ing mental cases in their midst. Later, we felt that some of the more deteriorated cases could be placed with less difficulty.

Dr. LaBurt, being a good business man, felt that where patients were able to give service they should be made more or less self-supporting.

I felt that the plan was an excellent one and he had my full approval. Any credit for this work is wholly his. In any event the important thing is that through the work of Dr. LaBurt patients are being placed in the community who would ordinarily be kept in the hospital.

The CHAIRMAN: Is there further discussion?

Before I ask Dr. LaBurt to close I will say that the department visualized something quite different from that which is being developed. I had in mind the selection of a certain village, persuading families to take one or two patients. No approval will be given to putting 20 patients in a reconstructed barn. That is wrong. The plan was to have one or two patients living with and being a part of a normal family. Generally speaking, it would not seem to be proper for the State to board a patient in the home of a near relative, although under certain circumstances even that might be defended.

Superintendents have extreme latitude and when we get a fund of experience we will know the best course to follow. Then it will be time to establish a settled practice.

Dr. LaBurt, do you care to say anything in closing?

Dr. LaBurt: We took a broader point of view of the subject and did not restrict family care to just the chronic group of patients who would otherwise have to be retained in a State hospital indefinitely. We also included the convalescent type of patients, some of whom have no friends or relatives. Many of these patients are capable of adjusting to a new environment if given an opportunity to do so and their egos are bolstered even if they earn their maintenance only.

The abilities of patients vary, some can do good work, some mediocre, some poor. It would be easy to place good workers and pay caretakers \$4 a week in addition but much difficulty would be encountered in placing the mediocre and poor patients thereafter. Caretakers would want only good patients for the \$4 a week allowance.

In order to place as many patients as possible at the least cost to the department, it was thought best to place the better patients with salary and maintenance, if possible. They would, in turn, pave the way for placing other patients in the community. As Dr. Ross stated, the hospital is new in the community and the natives are not as "mental hygiene minded" as others residing in communities in which State hospitals have been located

for years. We have been fortunate, in that patients thus far placed and their caretakers have advertised and boosted the project to their neighbors who, in turn, applied for patients. We, therefore, hope to eventually establish not one, two or three community centers, but a larger number.

In order to meet the demands of the type of workers desired, classes have been established in which patients are to be trained in various occupations.

Our ideas on the subject are not hard and fast. Many modifications and revisions will, no doubt, be made as experience with the project is gathered.

The CHAIRMAN: I had hoped Dr. Russell would speak on this subject.

Dr. Garvin is chairman of two committees, the Committee on Construction and the Committee on Uniforms. First we will have the report of the Committee on Uniforms, Dr. Garvin.

REPORT OF THE COMMITTEE ON UNIFORMS

The Committee on Uniforms presented, at the last Quarterly Conference held at the Rockland State Hospital, the following amendments to the departmental regulations for uniforms for State hospital nurses and employees:

Female pupil nurses, while on duty at affiliating hospitals, shall wear the approved uniform of their school, with white shoes and white stockings.

Male affiliates shall wear the approved uniform of their school, with white shoes and socks and surgical shirts.

Special attendant—occupational therapist, female (see page 321, last paragraph, Handbook, 1930). This paragraph has been changed to read as follows: Uniforms to be made of pre-shrunk Indian head (instead of chambray as formerly) with white pearl buttons, etc.

These amendments should be acted upon by this Conference.

The committee, since the Rockland conference, held a meeting at the New York office of the department, Friday, December 20, 1935, and the following business was transacted:

Dr. Gray of the committee has been interested in providing the following uniforms for chauffeurs, drivers, farm and ground employees which the committee recommends be given careful consideration by the Conference and that specifications be printed in the next SUPPLEMENT of the QUARTERLY so that they may be studied at leisure by the various superintendents.

Blouse: Cotton whip cord, oxford gray in color, peaked lapel collar, two large patch pockets with buttoned-through flaps, waist band to be made of same material as blouse with two side adjustment straps, two buttons on front of band, double elbow, one button cuff.

Trousers: To be made of same material as blouse with six belt loops sewed on waist band, front quarter-top pockets on each side, one watch pocket, two hip pockets, left hip pocket buttoned through. Cuff bottoms. Bar tack on all pocket openings and other points of strain. All trousers to be furnished with Brown outlet seat seam construction. Pockets and waist band linings to be made of heavy drill. All pockets to be sewed.

In some instances it may be advisable to use breeches instead of trousers. In such cases the following specifications should be followed.

Breeches: Same material as blouse, double seat and knee, buttoned bottom, six buttons on each leg, deep offset for adjusting to size of calf. Waist band, pockets, waist band linings, bar tacks same material and construction as trousers.

Shirts for winter use: Same material as blouse, attached collar, Talon zipper front, one button at neckband, two patchpockets with buttoned-through flaps, left pocket with pencil slot, one button cuff, plaquet sleeve opening.

Shirt for summer use: Oxford gray covert Sanforized shrunk, attached collar, sewed and turned and sewed again, coat style, six button front, two patch pockets, left pocket with pencil slot, one button cuff with continuous facing on opening, gray buttons to conform with color of shirt.

Made-up black leather bow tie may be worn with above uniforms.

The retail cost of the above uniforms, we are informed, run from \$8.95 to \$11.55 for the three pieces.

Miss Clune of the committee will give special study to the matter of providing special uniforms for the housekeepers and will report the result of her investigation at the next Quarterly meeting.

General Order No. 32, entitled "Uniforms," specifies uniforms only for State hospital employees. The committee recommends that this order include all institutions under the Department of Mental Hygiene where the standard uniforms can be utilized to advantage.

WM. C. GARVIN, *Chairman.*

It was moved that the three items relating to female pupil nurses, male affiliates and special attendant-occupational therapist, female, be adopted and incorporated in the specifications for uniforms for employees.

The CHAIRMAN: You have heard the motion. Are you ready?

The motion was carried.

The next report is that of the Committee on Construction, of which Dr. Garvin is chairman.

REPORT OF COMMITTEE ON CONSTRUCTION

The Committee on Construction made a tour of inspection of new construction of the Pilgrim, Rockland and Harlem Valley State hospitals and Wassaic State School, September 23-26, 1935. The customary policy of having the superintendents of the various hospitals prepare a list of constructive criticisms in connection with buildings recently occupied, those in course of construction and other matters pertaining to construction and service was adhered to. On their arrival at each hospital the committee would go over with the superintendent and his departmental heads the list prepared by the superintendents, after which they would check up on the spot the various criticisms offered. Any suggestions considered worth while would be noted down and utilized in further planning. During their visits the committee inspected all new buildings in course of erection.

The committee inspected the following new buildings at Pilgrim State Hospital: reception building, 642 beds; medical and surgical unit, 261 beds; infirmary, 1,018 beds, and farm colony (construction just begun), 147 beds. Also some of the older buildings where leaks through the walls had developed; this will be attended to by the State Architect. No leaky buildings were reported in our up-State tour.

Other units inspected were the employees' cafeteria near power house; new non-medical staff building and several of the dining rooms in the continued treatment unit in order to restudy dish washing arrangements.

At Kings Park, inspection of the following buildings made: new non-medical staff building; male reception unit; new storehouse and bakery; new 100-bed female infirmary unit and new continued treatment building which will house 1,320 male and female patients.

At Brooklyn, the new 600-bed sky scraper infirmary, diagnostic and treatment unit were inspected.

At Rockland, the new 812-bed hollow tile and stucco infirmary unit; new children's unit, 204 beds; new assembly hall; hospital exchange and employees' club; new non-medical staff building and the central vegetable preparation room unit.

At Wassaic, the new hollow tile and stucco medical, surgical, infirmary, tuberculous and isolation unit, 132 beds; new hollow tile and stucco assembly hall and class rooms.

At Harlem Valley, the industrial building and the central clothing rooms in the reception and infirmary buildings.

A tour of inspection of the following up-State hospitals was made by the committee, October 14-16.

At Newark State School the following new buildings were inspected: Infirmary, 254 beds; building for 100 disturbed patients; employees' home housing 47 single female employees and old storehouse. The new buildings are of red brick in the Colonial style of architecture and present a very pleasing appearance.

At Rochester the new three-story brick 600-patient building which will house disturbed patients on the first and second floors and tuberculous patients on the third floor; new assembly hall and employees' club; two new employees' homes; new administration building and some of the older concrete units.

At Craig Colony new two-family staff house; four new cottages in Village Green unit, 184 beds; and adjacent new kitchen and dining rooms with employees' quarters on second floor, new employees' home housing 36 women employees, with attached dining room and kitchen and the Murphy cottage.

En route to Gowanda State Hospital the committee inspected the new State Tuberculous Hospital at Mt. Morris, 250 beds, designed by Mr. Haugegard, State Architect.

The following new buildings at Gowanda were inspected: Female employees' home, 49 beds; reception building, 168 beds; infirm and tuberculous buildings, 512 beds; continued treatment building, 516 beds, laundry, bakery, storehouse, operating room unit, new central dining room and kitchen unit. All the new buildings are of red brick, Colonial in style and attractive in appearance.

The committee held two meetings at the New York office of the Commissioner of Architecture, December 9-10, at which they made a study of the preliminary plans for an 800-bed addition to the new infirmary unit at Brooklyn, a 400-bed reception building at Creedmoor and a 1,200-bed unit for disturbed male and female patients at Rockland State Hospital.

WM. C. GARVIN, *Chairman*.

The CHAIRMAN: What is your pleasure with the reports of Dr. Garvin as chairman of the Committees on Uniforms and Construction.

Hearing no contrary voice I declare them carried.

Next on the program is the report of the Committee on Nursing, of which Dr. Taddiken is chairman.

On September 4, 1936, 286 students, all in the registered nurse group, were admitted to the State hospital and Craig Colony schools of nursing. The following table shows the number admitted to each school:

MINUTES OF THE QUARTERLY CONFERENCE

Hospital	Men	Admitted Women	Total
Binghamton .....	..	8	8
Brooklyn	4	14	18
Buffalo	5	6	11
Central Islip	6	21	27
Craig Colony	5	7	12
Gowanda	7	6	13
Harlem Valley	7	7	14
Hudson River	9	14	23
Kings Park	10	15	25
Manhattan	9	15	24
Middletown	4	12	16
Rochester	5	7	12
Rockland	16	16	32
St. Lawrence	4	24	28
Utica .....	..	11	11
Willard .....	..	12	12
Total	91	195	286

The committee also submits a table showing students in the State hospital and Craig Colony schools of nursing as of October 1, 1935:

Respectfully submitted,

P. G. TADDIKEN,

Chairman, Committee on Nursing

The CHAIRMAN: What do you wish to do with Dr. Taddiken's report? A motion was duly seconded and adopted to receive and place the report on file.

Dr. Hutchings, unfortunately, is absent by reason of illness. Mr. Farrington has Dr. Hutchings' report of the Committee on Publicity.

Mr. Farrington reads report.

REPORT OF THE COMMITTEE ON PUBLICITY

Members of your Committee on Publicity are engaged in the preparation of a pamphlet guide for the preparation of reports and manuscripts to be submitted to the Commissioner and to the editors of the *PSYCHIATRIC QUARTERLY* and *Mental Hygiene News*.

In view of the fact that the department is publishing 27 annual reports, three periodicals and a considerable variety of other books and pamphlets, it is apparent that a guide relating to capitalization, punctuation, composition, style, proofreading, etc., would be very helpful.

Respectfully submitted,

R. H. HUTCHINGS,

Chairman.

STUDENTS IN THE STATE HOSPITAL AND CRAIG COLONY SCHOOLS OF NURSING ON OCTOBER 1, 1935

	Aggregate						Total						Junior						Intermediate						Seniors					
	M. F. T.			R. N.			T. N.			M. F. T.			R. N.			T. N.			M. F. T.			R. N.			T. N.			M. F. T.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Binghamton ..	1	24	25	1	24	25	..	..	..	..	..	..	8	8	..	..	..	..	10	10	..	..	..	..	1	6	7	..	..	..
Brooklyn	7	31	38	7	28	35	..	3	3	4	14	18	..	..	..	..	..	..	1	6	7	..	..	..	2	8	10	..	3	3
Buffalo	5	5	10	5	5	10	..	..	..	5	5	10	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Central Islip..	11	54	65	10	52	62	1	2	3	7	20	27	..	..	..	..	..	..	3	21	24	..	..	..	..	11	11	1	2	3
Craig Colony..	10	24	34	10	24	34	..	..	..	5	7	12	..	..	..	..	..	..	3	10	13	..	..	..	2	7	9	..	..	..
Gowanda	15	8	23	15	8	23	..	..	..	7	6	13	..	..	..	..	..	..	4	..	4	..	..	..	4	2	6	..	..	..
Harlem Valley	6	4	10	6	4	10	..	..	..	6	4	10	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Hudson River..	24	28	52	23	26	49	1	2	3	9	14	23	..	..	..	..	..	..	7	7	14	..	..	..	7	5	12	1	2	3
Kings Park ..	10	15	25	10	15	25	..	..	..	10	15	25	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Manhattan ...	16	38	54	16	35	51	..	3	3	9	15	24	..	..	..	..	..	..	4	16	20	..	..	..	3	4	7	..	3	3
Middletown ..	5	26	31	5	26	31	..	..	..	4	12	16	..	..	..	..	..	..	1	8	9	..	..	..	..	6	6	..	..	..
Rochester	6	14	20	6	14	20	..	..	..	4	7	11	..	..	..	..	..	..	..	..	..	..	..	..	2	7	9	..	..	..
Rockland	24	22	46	24	22	46	..	..	..	15	16	31	..	..	..	..	..	..	6	5	11	..	..	..	3	1	4	..	..	..
St. Lawrence..	9	47	56	9	47	56	..	..	..	4	24	28	..	..	..	..	..	..	3	11	14	..	..	..	2	12	14	..	..	..
Utica .....	..	25	25	..	25	25	..	..	..	..	11	11	..	..	..	..	..	..	7	7	..	..	..	..	..	7	1	..	..	..
Willard	1	17	18	1	17	18	..	..	..	..	12	12	..	..	..	..	..	..	1	5	6	..	..	..	..	..	..	..	..	..
Total	150	382	532	148	372	520	2	10	12	89	190	279	..	..	..	..	..	..	83	106	139	..	..	..	26	76	102	2	10	12

The CHAIRMAN: What action is to be taken on the report of the Committee on Publicity?

A motion was made that it be accepted.

The CHAIRMAN: Are there other committee reports? Is there any unfinished business?

Under the head of new business, I should like to say that it has been proposed that a tablet be erected in the Psychiatric Institute to commemorate the memory of Dr. Kirby. It would be very helpful if the department had an expression of the opinion of those assembled concerning the proposal.

Dr. GARVIN: Dr. Kirby was the first director of the Institute, was largely concerned in its planning and during the time he was director he gave his whole heart and soul to the work; therefore, I think it only fitting that a tablet be erected to his memory.

Dr. TADDIKEN: I so move.

The CHAIRMAN: The motion is carried.

Is there anything else under the head of new business?

A motion to adjourn was made, seconded and carried.

Conference adjourned.

LEWIS M. FARRINGTON, *Secretary*.

SOME OBSERVATIONS AND EXPERIENCES WITH FAMILY CARE OF PSYCHIATRIC PATIENTS

BY H. A. LABURT, M. D.

Statistics indicate that there are over 400,000 patients suffering with mental disease in this country. In New York there are over 60,000 patients in State hospitals and over 10,000 in State schools.

Regardless of the factors and in spite of our knowledge of psychiatry, mental disease is on the upgrade. The annual increase of patients in this country is about $4\frac{1}{2}$ per cent; in New York State hospitals the average annual increase for the past five years has been 2,537, in State schools 798, a total of 3,335, enough to require the construction of a new hospital every year. The annual cost is enormous and, as the increase of patients is cumulative, the cost will count unless curative or preventative measures are discovered, or new ways and means of lessening the burdens on taxpayers are devised. As the former measures are not likely to occur in the near future, new ways and means must be devised or construction of new hospitals continued.

From an economic standpoint and other viewpoints which will be discussed, it seems that family care of patients deserves serious consideration. Articles in the literature such as those by Brown, Pollock, Vaux, Smith, Thompson, Crockett and others, adequately describe the various types found in Europe and Massachusetts. In order to conserve time reference only is made to these and remarks will be confined to a few observations and experiences with family care of patients at Harlem Valley State Hospital.

Many objections have been offered against the plan, such as, "the patients would be exploited, neglected; they would be a danger in the community; they would be unwelcome; it would not be to their best interests; it would be impossible to supervise them," and many others. Obviously, the project could easily become lost if all objections to it were to be solved before the system could be started.

Convinced that family care is feasible, it was decided to inaugurate it at Wingdale and meet obstacles as they arose.

An active campaign was outlined and approval of the plan was obtained from local health officers. A series of lectures and talks were given before social workers' groups, parent-teachers associations, nurses' organizations, Grangers, and other civic bodies. They were given a general description of the plan and its aims and were informed as to the large number of patients that could be paroled into the custody of families in the communities.

The opportunities they afforded to carry out altruistic and humanitarian pursuits and the benefits to be derived by both patients and families were also cited.

The reaction to the plan was varied. Many were enthusiastic, others unconvinced and hesitant, others skeptical, in some its conception disappointingly garbled. A politician tried to capitalize on it by telling his constituents, "If you want to get pay for taking care of patients, see me and I'll fix it for you." A county agent was openly antagonistic and in a meeting of a health committee said, "Don't accept patients for \$4 a week and they will have to pay you more."

Applications were not received as rapidly as it was hoped and it was decided to have the patients "sell" themselves. Arrangements were made with a few of the better patients to work for their maintenance only in two or three families in "key" communities, no one else to know for a time that they were patients. They behaved well, worked hard and diligently and served as an example for later placements. Applications for patients naturally followed. Instead of offering patient help and paying for it, a salary and maintenance was asked for the better type patients; only maintenance for the mediocre, and the \$4 a week allowance was reserved for those who could render little or no service.

The "drive" was continued and the social service department made additional, desirable contacts.

To date, 33 males and 31 females, a total of 64 patients, have been placed. Of this number 9 men and 5 women were returned for various reasons, leaving a total of 50; 24 men and 26 women. As to type, they may be divided into the following groups:

I. Chronic patients, in whom little or no recovery can be expected. They may be regarded as requiring mere custodial care. Three males and eight females, a total of 11 patients, are listed in this category.

II. Convalescent patients, in whom recovery or rehabilitation may take place through family care. Thirty males and 23 females, a total of 53 patients are listed in this group.

As to financial arrangements and expense they may be divided as follows:

- A. Those who earn a salary and maintenance.
- B. Those who earn their maintenance only.
- C. Those whose relatives bear the expense.
- D. Those for whom the State assumes the obligation.

Every placement is regarded as an individual problem and conditions are arranged to meet the patient's particular needs. No hard and fast rules are laid down other than the usual requirements for physical comforts

and proper segregation as to sex. Each patient is to have a separate bedroom. However, two beds for patients in one room would be approved. The members of the family, their ages, personalities, location of home, reason for requesting a patient, type of work to be performed, etc., are considered together with the patient's age, sex, type, characteristics, personality, former occupation, aptitudes and adaptability. If everything is found to be satisfactory, the financial arrangements are made. One patient in a family is preferable, two acceptable and in only one instance have three been placed in a family.

To dispel any semblance of coercion or compulsion, the patients are made to clearly understand before they leave the hospital that they do not have to stay with the family unless they so desire. The families are assured that they may return the patient for any reason whatsoever. They are informed of the patient's special traits or peculiarities, if any, and instructed in a general way as to the best methods of management.

Patients' remunerations are commensurate with their abilities and services. They range from \$5 per month and maintenance to \$150 per month and maintenance. The social worker secured the latter salary for a male patient placed as manager of a country club. He had been an able advertising man, capable of earning a large annual income. The average salary obtained for male patients has been \$15 to \$30 per month and maintenance and \$10 to \$20 per month and maintenance for females. This is the largest group, consisting of 22 men and 15 women, a total of 37 patients.

A smaller group consisting of 9 men and 4 women, a total of 13 patients were placed in "free homes," receiving maintenance only for whatever services they could render. In some instances the hospital supplies their clothing.

Two men and three women, a total of five, with private means, and seven women only, whose expense of maintenance is borne by their families, were placed. These enable a higher rate of pay, averaging about \$10 a week and may be used to augment incomes of caretakers who accept "free patients" and those paying lesser amounts. Experience has taught that these placements must be handled with caution. Relatives to whom the plan was broached cooperated well, in fact, one too well. He stated that he couldn't possibly pay more than \$10 per week for the maintenance of his sister, a former grand opera star. She was accordingly placed with a nearby family. After a time she became rather tempestuous and was returned. She again improved and the brother, unbeknown to the hospital, went back to the caretaker to rearrange for her placement. She, remembering the patient's temperament and his reluctance to pay more than \$10 a week and

wishing to rid herself of him, said, "she couldn't possibly take his sister for less than \$20 a week." He, much to her amazement and surprise, instantly accepted the offer and she found herself with the patient in her custody again. Unfortunately for the hospital, however, the caretaker later went about the neighborhood telling that she was getting \$20 a week for the patient's care, and now they are asking for the same amount. The motto, therefore, is—"Never let one caretaker know what the other is getting."

It is felt that in the future these two groups can be utilized to greater advantage when combined with the group whose expense is assumed by the State.

Of this latter group three have been placed and only two remain. They were placed in order to demonstrate that the plan could be applied to this type also. As it was desired to place the better patients in more advantageous positions, and incidentally to the State, efforts have not been directed toward this group to any great extent. However, as demands for the other groups diminish more attention will be paid this one.

One placement usually suffices for the greater majority of patients. Occasionally, even when all factors seem to be satisfactory, a placement fails and repeated efforts may be necessary to make it successful.

The 64 patients required 82 placements. Of this number 13 men and women required a total of 31. Roughly, about 20 per cent needed more than one placement. Efforts were abandoned in the case of one man after four trials. However, in the case of a young dementia præcox patient, Rose D., who has a bad family background, a happy situation was brought about after four trials. She was first placed as a maid in a physician's home. The social standards there, apparently, were too high. She went home without permission and was subsequently returned. Next, she was placed as a laundress near her home. Family distractions were too much, and she was again returned. Her next position was that of domestic in a family with three grown children. Competition for attention in this family was too keen, she became upset again and had to be returned. After improvement she was next placed with an elderly couple of about her own social stratum. This couple's deceased daughter would have been about the patient's age if she lived and they, therefore, welcomed the patient with open arms. Her adjustment now seems to be very satisfactory as the family treat her as a daughter and take her wherever they go. They supply her with that long-needed parental attitude and guidance and she in turn fills a long-existing void in their family life.

Another male patient required three placements, 10 required two and the rest one.

No difficulty has been experienced in placing patients on account of their nationality or race. The group includes two male and two female negroes. Occasionally an application is received requesting a patient of certain nationality. An attempt is made to meet their wishes but no objections are offered if one is not available, and a patient of different nationality substituted.

Patients are visited from time to time, some more often than others, by a member of the social service department, or by a physician if medical consultation is needed. They are also encouraged to write as often as they wish to register any complaint or dissatisfaction.

Four men and one woman left homes of their caretakers without consent. Two of the men were returned; one woman returned to the home of a former employer and as she was getting along well, was permitted to remain. Word was received from one of the men in Arizona and it is hoped that the other one, a nomad, arrived safely in China or the South Sea Islands.

Men patients have been placed in 14 different occupations, of which "farm hand" is the largest group, consisting of 10 patients; 5 are listed as handy-men and 4 as PWA laborers; country club manager, short order cook, gardener, farm manager, farmer, dairyman, waiter, seaman, carpenter, gas station attendant and porter claim one and two each.

Occupations amongst women patients are not so varied. Thirteen are listed as maid and one each of housekeeper, nursemaid, pantry girl, clerk and beautician.

In order to meet the demands for farm workers, a class under the direction of the farmer has been established. Patients are taught milking and the general rudiments of farming.

A domestic arts class under the direction of the dietitian has also been started to teach women patients the general principles of housekeeping and dining room service. As male patients can be placed as restaurant workers and waiters they will also be included in the instruction given on dining room service.

Patients are receiving instruction in the various institutional beauty parlors. One "graduate" has already been placed and is doing well.

A female patient appeared to have made good progress and was placed in the home of a family in a desirable community. Within a few days she became upset, wilful and obstreperous and almost ruined the contact. In order to forestall any such recurrence, a "trial home" or "half-way house" has been established in the private home of an experienced hospital supervisor. Patients of doubtful adaptability will be tried in this home for a week or two before placement.

Naturally, a sharp outlook has been maintained for "exploitation" or overworking of patients. Investigations have not revealed any form of misuse or neglect. On the contrary many instances of kindness and sympathy toward patients could be cited.

Charlotte R., an old arteriosclerotic, ingratiated herself so deeply in the hearts of her caretakers that they hired a housekeeper to look after her rather than return her to the hospital when they took a European trip this fall.

William R., a simple paretic was so well liked by his former caretaker that he refused to sell his gas station to the buyer unless he took "Bill" also. He is now just as well liked by the second caretaker.

The caretakers of Annie S., a little old Scotch patient, are very fond of her. Annie goes to church and theater with them and writes "this is the life."

Placing patients in situations where social demands are light and occupations not too difficult has been most successful. Catherine F., a former private secretary, is very happy in her new position as housekeeper in a physician's home. Robert F., a former police officer, is contented in his position as waiter in a restaurant. May L., formerly a woman of means, is very gracious in her new position as housekeeper in a dentist's home.

Advancing them in the social scale has had its successes also. Elizabeth B., was an accomplished pianist with a well-known symphony orchestra but never associated with the right people. She was placed in a wholesome family group in a nearby city. She resumed her music and is now quite prominent in musical circles. Her brother, a broker, states, "She has never been so well." The grand opera star, previously mentioned, is now getting along quite well and is taking part in community musicales. Her caretaker is a leader in her community.

Families are pleased not only with services rendered by patients but also by companionship they contribute to the home.

Edward S., employed as a farm manager, converted the farm from a losing enterprise to a paying one.

John N. is doing exceptionally well as a handyman in a private school.

A county attorney who employs Anna H., writes that "she is the best maid they had."

The caretakers of Rose D. said "they always wanted a daughter and now they have one."

The caretakers of Henry S., an old senile, are very grateful for his presence in their home as he keeps "grandpa" occupied at chess every day. They are now "buddies."

Through family care one male patient, Wm. M., improved to such an extent that he was restored to his family.

A more wholesome attitude toward mental disease has been noted amongst the laity. To some extent family care is responsible for this. Mrs. —, a prominent woman in the community, bitterly opposed the coming of the hospital and later resented the presence of patients in her community. She was induced to accept a patient and later liked him so well that she asked for another to be placed on her son's farm. Robert F., now a waiter, is always welcome in the local men's club whose membership includes the leading citizens of the community.

Though it is new, factors seem to indicate that the project is feasible. It deserves further consideration and trial. Doubtless, new obstacles will be encountered and mistakes made but with gathering of experience, revisions and modifications may reduce these to a minimum.

The plan is more economical, at least it has been to date, and in times of depression or prosperity, no difficulty is anticipated in placing patients. In the future, "social centers" with an employee in charge would be established in various communities if the project becomes sufficiently extended to warrant them. These would facilitate its administration and possibly reduce costs.

More important than all else, patients are happier, more contented and natural. They look more human and act more human. Anyone who has visited them and talked to them will attest to it. When given a choice to return to the hospital with its comfortable beds, steam heat, showers, with no responsibility for cooking and laundering, or to stay in the home, be it ever so humble, they invariably choose the latter.

It would be amiss, indeed, to conclude this paper without mention of the approval and encouragement received from the Commissioner, the hearty and enthusiastic support and counsel of the superintendent and board, the cooperation of the staff and the untiring efforts and ability of the small social service staff who, in reality, performed the social work in this project in addition to their regular duties. Without the combined influences and sustained efforts of all mentioned, this discussion would not have been possible.

Following is the text of the Commissioner's letter authorizing the inauguration of family care.

STATE OF NEW YORK—DEPARTMENT OF MENTAL HYGIENE
ALBANY, NEW YORK

Reference No. 3047

May 23, 1935.

TO THE INSTITUTIONS IN THE DEPARTMENT:

The department invites attention to that part of Part I, Chapter 27, Laws of 1935, under the terms of which each institution can have \$20,000 made available for the inauguration of a system of family care.

Dr. Horatio M. Pollock discussed this project at a round table conference at the Washington meeting of the American Psychiatric Association last week. After discussing the types of family care, he stressed the following points:

Types Not Suitable for Family Care

- a. Patients needing constant medical or nursing attention.
- b. Patients suffering with mild or acute mental disorders who are likely to make prompt recovery.
- c. Disturbed or suicidal patients.
- d. Patients who are quarrelsome, contentious or have pronounced delusions of persecution.
- e. Patients with marked erotic tendencies.
- f. Patients who have severe convulsions.
- g. Patients suffering with infectious or contagious disease.

Mental defectives not suitable for family care would include all idiots; most low-grade imbeciles; most patients with marked physical defects or deformities; patients with a tendency to run or wander away; patients unclean in their habits or who cannot be trusted to keep themselves properly clothed.

After excluding all cases clearly not suitable for family care, a large number of suitable cases will remain, and from these, selection must be made to fit the home which is to receive the patients. If, at the time of placement, the family and the patient are both satisfied, the success of the placement is highly probable. On the other hand, if the patient enters the home of a dissatisfied family, or if the patient himself is displeased with the home to which he is assigned, the placement is likely to be a failure.

The Selection of Families to Receive Patients

The requisites of a home for the placement of patients would include:

- a. A comfortable house in which a satisfactory room for one or two patients could be provided without crowding the family.
- b. A garden plot on which vegetables and flowers could be raised.
- c. Proper heating arrangements so that patients would be kept comfortable in winter.
- d. Wholesome family life.
- e. A friendly attitude toward the patient on the part of ALL members of the household.

Stable, well-established families of the middle class would be most likely to cooperate successfully in this undertaking. After a time it might be possible for the placing institution to give a course of instruction to those desiring to become guardians of patients.

Not all institutions are so placed that family care can be instituted, but it is hoped that each superintendent of a State hospital and a State school (including Craig Colony) will study the neighborhood with a view of selecting a community in which he thinks he can begin community care shortly after July, 1935.

This topic merits the serious consideration of each superintendent and the department believes great benefit to the patients and to the State can result therefrom.

A REPORT ON A STUDY OF BOARDS OF VISITORS OF INSTITUTIONS IN THE NEW YORK STATE DEPARTMENT OF MENTAL HYGIENE

BY PROFESSOR ROY WILLIAM FOLEY,
COLGATE UNIVERSITY, HAMILTON, N. Y.

HOW THE PROJECT STARTED

In 1932, at the request of the Board of Visitors of the Rome State School, of which board I then was and still am a member, a study of boards of visitors of the institutions in the Department of Mental Hygiene of the State of New York was undertaken to learn, if possible, practices and experiences of other boards which might be helpful to our board and institution.

After receiving this request from the Rome board, Dr. Frederick W. Parsons, Commissioner of Mental Hygiene for the State of New York, was consulted, and he very kindly made it possible to read a large number of board reports in his office in Albany. Dr. Parsons also approved sending to superintendents and board members a questionnaire concerning the present and future services and functions of boards of visitors, and gave helpful suggestions as to its contents. Such questionnaires were prepared and sent, and interesting and valuable replies were received.

Before the study was completed it was necessary, for personal reasons, to table the project indefinitely. This year the work was resumed, again with the cooperation and interest of Dr. Parsons, and has been completed. It is a regret that it was not possible to present the report to the members of the Board of Visitors of the Rome State School in advance of this meeting for their reactions, discussion and suggestions. Perhaps the reading of the report to this larger audience will give it wider usefulness than was originally intended.

Many have assisted in the study. It would not have been possible without the hearty cooperation of board members, superintendents, and the personnel in the office of the Commissioner. To all who have made a contribution, grateful appreciation is expressed. On account of the rather abrupt temporary closing of the work two years ago, correspondence which should have had immediate attention was not answered. Some of this correspondence may be acknowledged in the near future.

SOURCES OF INFORMATION

The present paper is based on (1) the reading of monthly reports of boards of visitors; (2) the replies from board members, superintendents, and the Commissioner to questionnaires; (3) personal interviews with

members of the staff in the office of the Commissioner, including Dr. Parsons himself, and with superintendents, and board members; and (4) personal experience as a member both of a board of managers and a board of visitors, and as a teacher of sociology.

MONTHLY REPORTS OF BOARDS OF VISITORS

The monthly reports of boards of visitors will first be considered. These cover 17 State hospitals, 4 State schools, and Craig Colony, a total of 22 institutions, for 1932, 1933, and half of 1934. There were 599 of these reports, representing 599 meetings of boards of visitors. The reports studied averaged 27 for each institution, with Marcy State Hospital included, which had its first board meeting in May, 1934, and which contributed to the total only two reports.

The monthly board reports usually, but not always, consist of three parts: (1) the data on Form 111, which form is supplied by the office of the Commissioner, and entitled "Report of Board of Visitors;" (2) a supplementary report by the superintendent to the board, consisting of from 2 to 12 or more typed pages; and (3) the minutes of the board meeting, usually one or two pages in length.

Page 8 of Form 111, entitled "Report by Board," is usually blank. Here, according to instructions, board members are requested to report their observations regarding food for patients and employees, and to list criticisms and recommendations for the betterment of the institution. In a few instances this page is used for minutes of board meetings, or for items in the supplementary reports of superintendents to boards. On this page in nearly all of the reports from one institution is put "No criticisms or recommendations to offer." On the same page in the reports from another institution are repeated three items for nine months, and then one item is changed and the whole repeated for another 20 months. The reports from a few institutions have items on page 8 which are in accord with the printed heading of the page, and are new each month. Inspections by board members are frequently mentioned in the minutes of board meetings.

The data in Form 111 and in the typed supplementary report of the superintendent to the board together usually cover all of the items required by the Mental Hygiene Law as stated on page 119 of the Handbook of the Department of Mental Hygiene for 1935, which reads: "The superintendent shall personally submit, at each monthly meeting of the board of visitors, a report showing changes in population, health of patients, officers and employees; accidents, suicides, unusual sickness, infectious diseases; important occurrences relative to the welfare of the patients and to the management

and discipline of the employees, and such other matters as the board may specify." These reports of superintendents are highly instructive and interesting, as evidenced by personal contacts with board meetings at Rome, and by reading the board reports of other institutions.

The minutes of the board meetings usually record the name of the institution, the time and place of the board meeting, the names of the board members present (and sometimes of those absent), the adoption of the minutes of the preceding meeting, the reading and adoption of the report of the superintendent to the board, the reading and adoption of reports of board committees for inspection and other purposes, and any special items of business.

Boards of seven members each for 22 institutions total 154 board members. There were 175 board members listed in the board reports studied. The difference between 175 and 154, or 21, indicates the number of board members replaced during this period of two and one-half years when their terms of service expired, or during terms uncompleted because of deaths or resignations. The records show that 175 board members totaled 2,741 attendances at the 599 board meetings, an average of 15 attendances per board member for the period studied based on 175 board members, and an average of 17 attendances per board member based on 154 board members. There were never more than 154 board members at any one time.

Out of 175 board members, 27 attended from 1 to 5 meetings, 17 from 6 to 10, 34 from 11 to 15, 31 from 16 to 20, 42 from 21 to 25, and 22 from 26 to 30. Out of 175 board members 70 attended 20 or more meetings. This record of attendance would be even more favorable to boards if attendances of board members appointed to replace other board members were added to the attendances of their predecessors and counted for the period as single units.

Out of 599 board meetings 6 were attended by one board member, 27 by two, 89 by three, 145 by four, 195 by five, 104 by six, and 35 by seven. Out of 599 board meetings 332 were attended by five or more board members. For a part of the period considered some of the boards were not complete in their personnel, owing to intervals of time between the occurrence of vacancies and new appointments.

These statistics were checked twice, and although there may be slight unintentional errors, they are essentially correct. It is likely that part of the boards of visitors of 8 or 10 institutions held meetings in January, 1932, reports of which are not included in this study, because they did not happen to be sent to Hamilton from Albany for the final reading. Reports of such

meetings evidently were filed in Albany with the reports of the preceding year. This omission does not seem to be of great importance.

WHAT THE BOARDS DO AS SHOWN BY BOARD REPORTS

An attempt was made while reading the board reports to list the frequency and manner of board participation in institutional activities. Before presenting these data the Mental Hygiene Law as printed on pages 118-120 of the Handbook of the Department of Mental Hygiene for 1935 will be quoted. Article III, section 32, somewhat abbreviated, read as follows: "Boards of visitors, with respect to the institutions for which they are respectively appointed, shall have the powers and duties expressly conferred or imposed on them by this chapter, and such other powers and duties, not inconsistent with law, as may be prescribed by rules of the commissioner. . . . Each board shall: 1. Subject to such rules, take care of the general interests of the institution and see that its design is carried into effect. 2. Maintain an effective inspection of the institution, for which purpose the board, or a majority of its members, shall visit and inspect the institution at least once a month. Each board shall make a written report to the department and to the Governor within 10 days after each inspection, such report to be signed by each member making the inspection. Such report shall state in detail the conditions of the institution and of its inmates, and such other matters pertaining to the management and affairs thereof as in the opinion of the board should be brought to the attention of the department or the Governor, and may contain recommendations as to needed improvements in the institution or its management. 3. Keep in a book provided for that purpose, a fair and full record of their doings, which shall be open at all times to the inspection of the Governor or any person appointed by the Governor, or by either house of the Legislature, to examine the same, and of the Commissioner and his representative from the department. 4. Hold regular meetings at least once each month, and cause to be written within 10 days after each such meeting, the minutes and proceedings of such meeting, and cause a copy thereof to be sent forthwith to each member of such board, to the department, and to the Governor. 5. Enter in a book, kept at the institution for that purpose, the day of each visit of each member. 6. Make to the department in July of each year, a detailed report of the results of their visits and inspection, with suitable suggestions and such other matters as may be required of them by the Commissioner for the year ending on the thirtieth day of June preceding the day of such report. Such report shall be prepared by a committee of the board, subject

to the approval of the board." This is the law which defines the general powers and duties of boards of visitors.

In the reports read, among a much longer list, the following topics selected at random as samples, were listed as having been discussed or approved by boards at their monthly meetings: Speed limit for autos on grounds, budget appropriations, sewage disposal, occupational therapy, parole and mental hygiene clinics, an injury to a patient, methods of paroling patients, appointment of consulting physicians, excavating, grading, awarding of contracts, construction of new buildings, construction of a dairy barn road, problems involved in reduced appropriations for the year, and the probable results of proposed changes in hospital districts.

The following miscellaneous participations are listed: A board attends the commencement exercises of a training school; a board member gives an address to a training school class; a board gives a prize for the highest grade in the final examinations of a training school class, and the prize is presented by a board member; a board gives two prizes for baseball; a board hears the presentation of charges against an employee; an assembly hall is named after a board member; a board approves monthly expenditures for a community store, and for occupational therapy activities; Dr. Parsons attends board meetings at different institutions; board members read in the monthly meetings correspondence with Dr. Parsons, the Commissioner, about matters pertaining to institutions; board members attend dinners and other meals with superintendents; board members receive from superintendents many invitations to special events at institutions; superintendents read at board meetings interesting correspondence about institutional activities; and several institutions provide stationery with names and officers of boards.

General inspections of parts of institutions without special committees or comprehensive plans are frequent. One superintendent arranges inspection trips each month for the board to different parts of the institution. In one board an inspection committee is appointed each month, and the reports of these committees are typed and made parts of the monthly reports. One institution has four committees on inspections: On care of patients, on food, on care of linen and bedding, and on social service. Another institution has board committees on food supplies, kitchen and dining room; on building and repairs; and on care and treatment of patients. Board committees on occupational therapy, new admissions, the community store, and the preparation of the annual report are also listed.

In one of the institutions the minutes of the board meetings are almost entirely filled with personal reports of individual board members on parts

of the institution visited and inspected before board meetings. Incidentally this institution has to its credit the largest number of attendances at board meetings from its combined board members for the period studied. There may be no significant correlation between these two facts, but on the surface it seems to indicate that the members of the board somehow became enough interested in the institution to attend the board meetings with regularity. Out of 29 meetings of this board, 7 members were present at 5 meetings, 6 at 11 and 5 at 10. This means that out of 29 meetings 5 or more board members were present at 26.

The fact should not be overlooked that the administrative officers of the Department of Mental Hygiene in Albany and superintendents of institutions have been cordial and generous in their invitations to board members to attend Quarterly Conferences, and that the Commissioner himself has always been willing and eager to be of any possible service to board members. The superintendent at the Rome State School has entertained the board at many special functions, and has often invited board members to accompany him on trips about the State to give them opportunity to become acquainted with important phases of the work of this institution. And what is true of Rome is undoubtedly true of other institutions.

THE QUESTIONNAIRES

The questionnaires were sent out in February, 1933, to all superintendents and board members of institutions in the Department of Mental Hygiene, and to the office of the Commissioner. The replies which have been used were received soon after this date. There were 10 questions, as follows:

1. What do you consider to be the most outstanding uses or services of boards of visitors?
2. What do you consider to be the most outstanding defects or weaknesses of boards of visitors?
3. How may boards of visitors become more valuable to superintendents, to the institutions, and to the State?
4. How may interest and responsibility be stimulated in board members?
5. What should board members know about their respective institutions, and how shall they become thus informed?
6. What matters pertaining to institutions should be considered by boards of visitors at the monthly meetings?
7. How should inspections be conducted by boards of visitors?
8. How should agenda for board meetings be prepared?
9. What part should superintendent and board members have in the monthly meetings?

10. What items should be in the monthly report to the Department of Mental Hygiene, and in what form should the report be prepared and sent?

There were 55 replies to the questionnaires. Of this total 47 came from board members, 7 from superintendents, and 1 from the Commissioner of Mental Hygiene. Of the 47 replies from board members 4 were sent for four whole boards of 7 members each, and 1 was sent for four members of a board. It is not possible to tabulate with numerical accuracy answers with so many shades of meaning and of such variety. Neither the questions nor their answers are mutually exclusive. Some replies did not contain answers to all of the questions, and some answers to questions would be more pertinent as answers to other questions. All of the answers in the questionnaires have been read, and an attempt has been made to tabulate the various ideas expressed. Such tabulation helps to show trends, but the same fundamental idea may be expressed in many different ways, and it is not possible to conclude that a certain number of people stand for one idea as against another. Three or four tabulations would not bring the same results, and some other person might arrive at a still different conclusion. One cannot read with care the answers in the questionnaires and attempt a tabulation of the ideas there expressed, however, without becoming aware that in the midst of a great variety of opinions there are certain outstanding trends in thought. While the summaries of the answers to the various questions which are to be given here are not mathematically accurate, and while they reflect considerable subjectivity, an attempt has been made to present the answers so that they will tell their own story.

QUESTION 1

Question 1 is "What do you consider to be the most outstanding uses or services of boards of visitors?"

The replies from board members seem to place most emphasis on three uses or services. One of these is constructive suggestions for the Department of Mental Hygiene and superintendents. Another is being sounding boards between the institutions and the public, interpreting the institutions to the public and the public to the institutions. A third, which is prerequisite for usefulness in the other two ways, is to understand the work, problems, and ideals of the institutions through visits and inspections. Some of the other uses mentioned are: Cooperation in every necessary way with the management; regular attendance at board meetings; investigation of complaints involving patients, employees, superintendents, and the public; personal visits with patients to let them know there are outside interested groups connected with institutions; assisting taxpayers by helping to reduce

unnecessary expenditures; commending employees for efficient service; and attending special functions at institutions. One board member says that boards at the present time perform no service whatever, and are absolutely useless; and another thinks that duties of boards are so poorly defined that neither superintendents nor board members know what they are.

The replies to this question by superintendents and the Commissioner emphasize the following: Boards may be connecting links between the public and the institutions; they may be sympathetic and constructive advisors of superintendents and the Commissioner, and bring to them views of the public which otherwise might be overlooked; they may represent in many ways the local communities and the public; they may assist in securing and maintaining proper legislation; they may learn whether patients are receiving adequate care, and whether institutions are conducted in the interests of the patients and the public; they may keep informed and interested in the institutions through visits and inspections; and they may protect the management against unfair criticism by the public. One superintendent says that board members should appear dignified, be well dressed, and try to look intelligent at the Quarterly Conferences.

QUESTION 2

Question 2 is "What do you consider to be the most outstanding defects or weaknesses of boards of visitors?"

The replies from board members emphasize two defects or weaknesses. One is that boards do not seem to have any definite responsibility, or prestige, or necessary place in the present departmental organization, since they have been changed from boards of managers to boards of visitors with diminished power and authority. The other is that boards are not well enough acquainted with their institutions because visits of inspection are infrequent and inadequate, and with the result that the performance of duties is desultory and perfunctory. Other answers to the question are: Irregular attendance at board meetings; the use of board membership for political or social prestige rather than for service to the State; and lack of personal acquaintance with patients, their relatives and friends. Two say that there are no outstanding defects.

Replies from the Commissioner and superintendents are: Failure to have enough active and detailed contacts with institutions to understand their work, problems, needs and limitations; irregular attendance at board meetings; using board membership for other purposes than for service to the State; and interference with administration and discipline.

QUESTION 3

Question 3 is "How may boards of visitors become more valuable to superintendents, to the institutions, and to the State?"

Replies from board members emphasize two ways in which they may become more valuable. The first is by acquainting themselves with the details of institutional operation and management by frequent inspections, interviews with superintendents, faithful performance of duties, reading, and regular attendance at board meetings. The second is by the development of a real feeling of responsibility through worthwhile participation, and by removing the present belief that they are not wanted or needed.

Other answers suggest: Better cooperation with superintendents and the department; assistance to superintendents during periods of unfair adverse criticism; more intelligent recommendations; more regular attendance at Quarterly Conferences; separate programs for board members at Quarterly Conferences simultaneous with the scientific programs for superintendents and physicians; a meeting for all board members at least once a year; the appointment of board members for special ability rather than for political or social prestige; selling the institutions and their programs more adequately to the public; bringing a non-technical outside viewpoint to the work of the institutions; more cordial encouragement of boards by superintendents; and better board reports from superintendents, many of which are trite, formal and uninteresting because they are not prepared with enough care and with reference to the needs and interests of the board members.

Replies from superintendents and the Commissioner emphasize the need for a better understanding of the work of institutions by board members through more thorough and detailed inspections, and by taking more time to learn the institutions. Such an understanding, they say, will enable board members to make intelligent recommendations, and to discuss and help solve difficult problems. It will also give stability to management, foster public confidence in State institutions, and prepare the way for institutional programs including preventive work through clinics and talks. One superintendent says that board members may become more valuable by keeping away from the institutions as much as possible and allowing the superintendents to run them.

QUESTION 4

Question 4 is "How may interest and sense of responsibility be stimulated in board members?"

Board members emphasize two ways in which this may be accomplished.

First they say that board members must be made to feel more important and necessary by delegating to them more authority and power, or at least more responsibility, instead of allowing them to believe they are superfluous and, as one board member says, "little more than a board of snoopers." They say also that interest may be assured by selecting for board members, even by the use of advance questionnaires if necessary, only those people who are interested, and capable, and who have time for the work.

The following are also suggested: Superintendents may ask board members to undertake concrete special activities from a list of possibilities which he has prepared; boards may be divided, either by themselves or by superintendents, into small committees of one or more for definite phases of institutional activities, realizing that interest cannot be created in board members simply by having them attend board meetings and listen to superintendents, without active participation in board meetings and in the affairs of institutions; superintendents, by their personalities and attitudes toward board members, may encourage more intelligent interest; more board members might attend Quarterly Conferences; there might be a meeting for board members at least once a year at the time and place of a Quarterly Conference; board members might be paid fees for attending meetings; there should be systematic education for board members including personal contacts with institutions, projects and concrete responsibility; there might be reports in some detail to boards by heads of departments; interest must be created in board members in some other way than by pay, because the State cannot afford to compensate adequately desirable board members; and board members should realize that the best possible care of patients is more important than individual prerogatives of either superintendents or board members.

The replies from superintendents and the Commissioner emphasize the following: Superintendents should help board members to learn more about their institutions by contacts with many phases of institution activities; specific tasks should be allotted to individual board members or to small committees; there should be special instruction tours of the institution for board members; attendance of board members at Quarterly Conferences should be encouraged; superintendents and the Commissioner should seek advice and counsel from board members; superintendents may maintain friendly and stimulating attitudes toward board members; and more careful selection of board members should be made.

QUESTION 5

Question 5 is "What should board members know about their respective institutions, and how shall they become thus informed?"

There seems to be but one general point emphasized in the replies of board members. It is that board members should learn as much as possible, or as much as they can understand, of the general work, management, and activities of institutions. They may become thus informed by attendance at monthly meetings, by extra visits and inspections, by conferences with superintendents, by reading the Handbook of the Department of Mental Hygiene, and by individual work on subcommittees.

The replies from superintendents and the Commissioner say that board members should be intimately acquainted with all of the operations of institutions served by them through personal visits and inspections, personal acquaintance with department heads, board meetings, inquiries from superintendents and other officers, visits to other State institutions, and by reading the official Handbook of the department and the **PSYCHIATRIC QUARTERLY SUPPLEMENT**.

QUESTION 6

Question 6 is "What matters relating to institutions should be considered by boards of visitors at the monthly meetings?"

The replies from board members emphasize the importance of adequate consideration by boards and superintendents of all important or necessary matters which concern the conduct and administration of institutions and the care of patients, including subjects prescribed in the Handbook of the department, and preferably those subjects which are of interest to board members and which can best be understood by them. Mention is also made of superintendents seeking advice from board members; providing opportunities for board members to make suggestions at board meetings, and to suggest for discussion any problems or questions concerning their visits and inspections; and including in programs for board meeting reports of board members on their visits and inspections.

Replies from superintendents and the Commissioner say that everything pertaining to the supervision and management of institutions should be discussed at board meetings, including the matters in the form report and in the supplementary report of superintendents, the reports from departments, the needs of institutions, the operations for the preceding month, and any matters of unusual interest or importance.

QUESTION 7

Question 7 is "How should inspections be conducted by boards of visitors?"

The replies from board members say that all board members should make visits of inspection at least once a month, and report on these inspections at board meetings. These visits may be individual, or in small groups or committees, with or without official escort, at regular or irregular and unexpected intervals, and supplemented by monthly visits of boards as a whole. Other suggestions are: Inspections are best when informal; there should be no set plans and dates for inspection; there should be a thorough inspection at least twice a year for a fee; boards might attend entertainments at institutions; board members might come early to board meetings to make inspections; and special arrangements should be made for inspections for boards whose meetings are not held at institutions.

The replies from superintendents and the Commissioner emphasize the following: The specialized interests and knowledge of the various board members might be capitalized; informal inspections are probably better than formal with the superintendent; it is probably better that visitors be accompanied by some officer so that necessary explanations may be made; inspections are probably more valuable on other than board meeting days; special assignments may be made to board members or committees, with reports at monthly meetings and with opportunity for board members to ask questions. One superintendent says that inspections should be made as boards themselves determine.

QUESTION 8

Question 8 is "How should agenda for board meetings be prepared?"

Answers from board members to this question do not seem to contain any single outstanding point, although valuable suggestions were received. The answers say: Programs for board meetings may be arranged either jointly by superintendents and representatives of boards, or by superintendents, or by representatives of boards; reports of superintendents should be prepared and mailed to board members in advance of board meetings to assist in discussions; and secretaries or other representatives of boards should prepare programs after the receipt of the advance monthly reports from the superintendents. Other suggestions are that board meetings should be informal, that free discussion should be allowed at any time, that reports from all departments of institutions should be given at board meetings, and that committees on inspection and other board committees should give reports which have been prepared in advance. Some think that board meetings

might be made more interesting to board members, and that each institution should make its own plans and agenda for board meetings.

Replies from superintendents and the Commissioner emphasize the following: Detailed reports should be prepared by superintendents and sent to board members several days in advance of monthly meetings to stimulate discussion; reports of superintendents must be given according to law, and these reports and any other matters suggested by superintendents or board members should be discussed; and officers of boards might form program committees, with superintendents as ex-officio members, to arrange programs for meetings. The suggestion is also made that programs for board meetings should be prepared as board members request and desire.

QUESTION 9

Question 9 is "What parts should the superintendents and board members have in the monthly meetings?"

Replies from board members place emphasis on cooperation, frank and open discussion, interchange of ideas, equality, informality, and freedom of expression; and on providing plenty of time for superintendents to give their reports as they wish. Other suggestions are: Superintendents should remain through entire meetings; superintendents should not attend the first parts of meetings; occasional meetings should be held without superintendents; chairmen or presidents of boards should conduct meetings; and good meals, particularly if in advance of meetings, produce expanded imagination, generosity and harmony. There seems to run through these answers the idea that the parts played in the monthly meetings by superintendents and board members should not be stereotyped, and that they depend to a considerable extent upon the personalities of those concerned.

Replies from superintendents and the Commissioner emphasize: Superintendents should be with boards all of the time at meetings, or for the greater part of the time; boards should have opportunity for private meetings if desired; there should be close and friendly cooperation between board members and superintendents; superintendents must have opportunity to make their reports as specified in the law; there should be free discussion of any and all matters between superintendents and boards; and superintendents should not dominate meetings.

QUESTION 10

Question 10 is "What items should be in the monthly report to the Department of Mental Hygiene, and in what form should the report be prepared and sent?"

Replies from board members place emphasis on the adequacy of the present form of report with the usual supplements, and on including in the report all items bearing on the institution and its work. Mention is made of the following: Reports should be uniform for convenience and comparison; they should be both complete and brief; there should be no stereotyped form; they should include the report of the medical superintendent, of board committees, and suggestions for improvements. It is also thought that the Department of Mental Hygiene should properly determine what form of report, and what contents, will best serve its needs.

Replies from the Commissioner and superintendents emphasize: The present method of reporting is quite satisfactory; information required by Form 111 seems sufficient for the ordinary routine, and this may be supplemented by additional sheets if necessary; and the report should cover the items named in the Mental Hygiene Law.

OUTLINE OF SUMMARY

This ends the account of the examination of the board reports and questionnaires, and of the Mental Hygiene Law as it pertains to boards. No account will be given of the personal interviews with board members, superintendents, and the Commissioner; and no account of the background of personal experience for a considerable number of years as a member of a board of managers and a board of visitors in the Department of Mental Hygiene, and as a teacher of sociology with special interest in social pathology. To give an accurate and detailed account of these experiences would be difficult, and would not add materially to the discussion. It will be enough simply to say that they are recognized as conditioning factors in the shaping of these opinions and attitudes.

A brief summary of the evidence based on all these sources will now be attempted. The summary will assume this background of personal conditioning, and will consist of two parts: (1) A brief statement concerning the evolution of the present Department of Mental Hygiene; and (2) a statement of conclusions from the reading of board reports, questionnaire answers, and the Mental Hygiene Law.

EVOLUTION OF THE DEPARTMENT OF MENTAL HYGIENE

Through many years there has developed, as a part of the governmental machinery of the State of New York, the present Department of Mental Hygiene. This department, in addition to other responsibilities, has supervision, through its Commissioner and his staff, of 18 civil State hospitals, 5 State institutions for mental defectives, and 1 State institution for epileptics.

It has millions of dollars invested in land, buildings and equipment. Connected with each institution is a superintendent and his staff, and a board of visitors with legally defined status, privileges and duties. A host of taxpayers are furnishing the money to finance the department. Other State departments handling problems of finance, supplies, law, architecture, etc., are making their contributions. The Governor and Legislature also participate, and the State police assist in many ways.

All of this plant, personnel and machinery, through which the Department of Mental Hygiene functions, is not a direct creation, but rather the result of an evolutionary process. The very ideas of caring for such people as are in these institutions, and the ideas of what kinds of care they require and can be provided, are evolutionary. Ideas about these and many other important matters have been altered many times, and will undergo numerous changes in the future. New ideas suggest new machinery, and adjustments are usually slow. If the functional viewpoint is maintained, making of primary importance the job to be done, and of secondary importance the development of machinery for the job, then no ideas and ideals of service to patients, and no arrangement of personnel and machinery to accomplish these ideas, should be considered permanent or final. No part of an organization has value in itself alone, but only in relation to the whole of which it is a part. It is difficult, in a rapidly changing social order, to keep large machinery, involving many people and ideas, efficiently adjusted to changing needs. And it must be expected that any large State department shall require constant readjusting of the parts within itself to each other, and as a whole in relation to other governmental departments.

The State of New York has a tremendous responsibility in attempting to care for the many people in the institutions of the Department of Mental Hygiene. The personnel of the Albany office, superintendents, and all other employees, and boards of visitors, and units of the material plant, are supposed to have their places in this departmental scheme as agents of the State in the care of these patients and wards of the State. Whenever, with the functional viewpoint still in mind, any part of the personnel or equipment no longer contributes to this end and it has little justification for continued existence, a reasonable amount of change may be considered necessary and inevitable, and each such disturbance eventually requires the personal readjustment of various units in the service staff.

In the evolution of the Department of Mental Hygiene there appeared a number of years ago boards of managers. At that time there were not as many institutions as today, and those which existed were more independent and not coordinated under an inclusive departmental supervision. These

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boards of managers were evidently created because, for some reason, they were considered necessary. Later, when it seemed that boards of managers as existing, were no longer essential, they were changed under the new Mental Hygiene Law to boards of visitors; and to readjust them to the new central control, some restrictions were placed on their former powers and authority over institutions. For better or worse they still are a part of the present departmental organization; under the law they have even more authority and power than is ordinarily being used by them, and they are supposed to perform a necessary service.

Many superintendents and board members are questioning the status, functions and value of boards, as they should occasionally question every phase of departmental organization. Perhaps boards of visitors are no longer necessary and should be removed. Perhaps they still meet a real need but require readjusting with the whole scheme of which they are parts. Decision on this point should not be made without fair and impartial consideration of available data, both concerning boards themselves, and the whole department with its many public contacts. Boards should not be condemned because somewhere a board member was indiscrete, or interfered with what a superintendent thought was his own province of decision and control; and they should not be approved because somewhere a few board members seemed to be of help to a superintendent and on friendly terms with him. Too often generalizations are based on exceptional or at least inadequate representation of the whole. The responsibility for governmental administration in the State is upon the Governor and his departmental heads with their immediate associates, and they should know what the job of any department requires and whether boards perform a useful service.

Perhaps there are other parts of the machinery and personnel, created to participate in the departmental job, which are more or less traditional and lagging behind changing demands, and which also should be discarded or altered in the interests of efficiency, service and economy. Entrenched interests and prerogatives in any large organization operating over a period of years are likely to become inflexible and inadaptably, and to outlive their usefulness. The end for which the machinery was developed may even be sacrificed to the continuation of machinery which no longer adequately functions.

Surely board members, most of whom are busy with professional activities, should not spend their time, as records show that they do, in attending board meetings, and the State should not be spending money on boards, if they no longer serve or can be made to serve a useful departmental purpose.

Entering into the problem of functions of boards is the whole question of

status for board members and superintendents. People value highly their status in society, and may resort to almost any means to preserve or increase it. The feelings of some board members, who were formerly members of boards of managers, seem to be hurt and their capacity for service limited, because they have been deprived of the authority and prestige which they once had. Other members of boards of visitors, who were never members of boards of managers, seem to be uncertain of their status in the department. Nearly all people like to feel that they are needed and wanted. Perhaps some board members are interested in status for personal benefit rather than for service to the State. The acquiring of more authority and prestige by superintendents has increased their relative administrative status, and in some instances may have had undesirable results in their thoughts about boards, and in their dealings with board members.

SUMMARY OF BOARD REPORTS, QUESTIONNAIRE ANSWERS, AND THE MENTAL HYGIENE LAW

This summary will cover five main points about boards: (1) Services and activities; (2) defects and weaknesses; (3) increased usefulness; (4) monthly meetings; and (5) monthly reports.

The reports of boards of visitors show that board members have probably been as regular and faithful in attendance at board meetings as can reasonably be expected from a non-compensated, volunteer, lay group. The reports list many ways in which boards participate in institutional activities, both of a technical and non-technical nature. The questionnaire answers say that boards of visitors may be sympathetic and constructive advisors of the department and superintendents, may help to secure and maintain proper legislation, and may be connecting links and sounding boards between the public and institutions. It might also be suggested that sometimes decisions, which would be embarrassing to a superintendent, may be passed on to a board to give them a more impersonal character. A very few board members, probably because of their diminished authority and power, think that boards are useless. One superintendent, evidently forgetting that board members have passed the adolescent stage and underestimating their capacity, would limit their usefulness to appearing dignified, being well dressed, and looking intelligent at the Quarterly Conferences. The Mental Hygiene Law, the full text of which has already been quoted, mentions as the duties and functions of a board: (1) Helping to accomplish the design of the institution; (2) inspections and reports; (3) constructive recommendations; (4) keeping a book record of activities; (5)

monthly meetings and reports; (6) keeping a book record of visits and inspections; and (7) preparation of the annual report.

The questionnaires report the following defects or weaknesses in boards: Boards are not well enough acquainted with their institutions because they do not take enough time and make enough visits to learn about them; they do not feel definite responsibility and do not have enough interest; and they interfere with discipline and administration.

The questionnaires say that boards may become more valuable by eliminating the defects just mentioned. They must learn as much as possible, or as much as they can understand about their institutions. This can be done by attendance at monthly meetings, visits and inspections, greater familiarity with the Handbook of the department, and by work on board committees. Through such activities they will accept more responsibility and feel more important and necessary. Also more careful selection of board members may be made to the end that only those who are interested and otherwise suitably qualified are appointed. One superintendent thinks that boards may become more valuable by staying away from institutions as much as possible and allowing superintendents to run them. It might not be out of place at this point to suggest that if a board should stay away permanently from an institution, a superintendent still would be dependent upon considerable assistance because institutional administration seems to be a cooperative project, as was explained in the discussion of the evolution of the Department of Mental Hygiene; and it might even be necessary to use in some administrative capacity another lay group similar to boards, which might prove to be better or worse. The suggestion will also be ventured that boards should not have more legal authority and power. They have more now than they are using, part of which at least does not seem to be very much recognized either by board members or superintendents. There seems to be no reason why boards should be consulted about technical matters outside their range of expert knowledge, or why they should interfere in any way with the management or administration of superintendents. Board members may be given plenty of useful things to do within the range of their present interests and capacities, which will create in them loyalty, responsibility and a sense of belonging to the institutions, and which instead of interfering with the administration of superintendents will be of definite benefit to them.

The questionnaires consider three important points about board meetings: (1) How agenda should be prepared; (2) what topics should be considered; and (3) the parts which board members and superintendents should take in the meetings. Agenda may be prepared jointly by a superintendent and a

representative from the board, by a superintendent alone, or by board representation alone. These meetings are primarily for boards, rather than an impersonal compliance with the law. They should be made interesting to board members, and should be planned at least in part by boards. All important matters concerning the functioning of the institution may be discussed. The superintendent should give his report, but in addition there should be active board participation through board reports and otherwise. Any topic suggested by either a board member or superintendent may be discussed, and particularly those topics of greatest interest to boards. The superintendent usually should be present at meetings but should not dominate, and both superintendents and board should understand that occasional meetings may be held without the superintendent.

Board reports are not as important from the standpoint of boards as what actually happens to board members in their institutional relationships. Whatever the Albany office desires in form and content of board reports should be supplied. The Department of Mental Hygiene, including superintendents, seems to think that the present board reports, consisting of Form 111 with whatever additional sheets may be necessary and the minutes of board meetings, are satisfactory. If a personal question were to be raised, it would be as to whether the reports of board meetings sent to Albany should include more than actually transpires at the meetings. The Department of Mental Hygiene does not depend on board reports for its detailed knowledge of institutions, but rather upon its own official inspectors. It would seem then that the board reports might be real reports of board meetings and board activities, and that necessary additional information might go to Albany in some other way. In this connection it is interesting to note that page 8 of Form 111, which is made specially for board reports of inspections, is usually left blank. Perhaps the present board reports are neither real reports of boards nor real reports of superintendents to the Commissioner.

F. W. Bain, in "A Digit of the Moon,"* tells a Sanskrit story of the creation of women, which reads: "In the beginning, when Twashtri came to the creation of woman, he found that he had exhausted his materials in the making of man, and that no solid elements were left. In this dilemma, after profound mediation, he did as follows. He took the rotundity of the moon, and the curves of creepers, and the clinning of tendrils, and the trembling of grass, and the slenderness of the reed, and the bloom of flowers, and the lightness of leaves, and the tapering of the elephant's trunk, and the glances of deer, and the clustering of rows of bees, and the joyous

*F. W. Bain, *A Digit of the Moon*, James Parker and Company, London, 1909.

gayety of sunbeams, and the weeping of clouds, and the fickleness of the winds, and the timidity of the hare, and the vanity of the peacock, and the softness of the parrot's bosom, and the hardness of adamant, and the sweetness of honey, and the cruelty of the tiger, and the warm glow of fire, and the coldness of snow, and the chattering of jays, and the cooing of the kokila, and the hypocrisy of the crane, and the fidelity of the chakrawaka; and compounding all these together, he made woman, and gave her to man. But after one week man came to him and said: Lord, this creature that you have given me makes my life miserable. She chatters incessantly, and teases me beyond endurance, never leaving me alone; and she requires incessant attention and takes all my time up, and cries about nothing, and is always idle; and so I have come to give her back again, as I cannot live with her. So Twashtri said: Very well; and he took her back. Then after another week, man came again to him, and said: Lord, I find that my life is very lonely since I gave back that creature. I remember how she used to dance and sing to me, and look at me out of the corner of her eye, and play with me, and cling to me; and her laughter was music, and she was beautiful to look at, and soft to touch; so give her back to me again. So Twashtri said: Very well; and gave her back again. Then after only three days, man came back to him again, and said: Lord, I know not how it is; but after all, I have come to the conclusion that she is more of trouble than a pleasure to me: so please take her back again. But Twashtri said: Out on you! Be off! I will have no more of this. You must manage how you can. Then man said: But I cannot live with her. And Twashtri replied: Neither can you live without her. And he turned his back on man, and went on with his work. Then man said: What is to be done? for I cannot live either with her or without her."

Boards of managers were created for the institutions now in the Department of Mental Hygiene, and later to adjust them to changing conditions with central control, were made into boards of visitors. These boards, like the woman of the story, are a compound of elements both desirable and undesirable. At the present time their usefulness and status are being questioned. They satisfy certain needs and also are the cause of some trouble. They are wanted and at the same time are not wanted. Perhaps, if they were discarded, another group of lay citizens appointed from outside the department, with all of the shortcomings of the present boards, would be sought. Perhaps the department and the institutions will still have problems in relations with the public, either with or without boards.

ANNUAL GRADUATE COURSE

From September 30 to December 6, the annual course in neurology and psychiatry was conducted at the New York State Psychiatric Institute and Hospital in cooperation with the College of Physicians and Surgeons and the Neurological Institute.

Physicians from the staffs of hospitals in the New York State Department of Mental Hygiene attended this year's course, which consisted of lectures, demonstrations and practical clinical work in psychiatry and neurology. Each physician presented a book review and the summary of an adult or child psychiatric case. Each physician selected or was assigned, a topic for a thesis to be worked up from material available in the Psychiatric Institute library.

During the course emphasis was placed on psychiatric problems occurring in childhood, and an opportunity was given for observation of the functioning of the out-patient clinic and wards for children.

The teaching staff was augmented this year by Dr. Kurt Goldstein, formerly of Berlin, Germany, who discussed in his lectures the organic psychoses from the psychological and biological standpoint. The regular studies were supplemented by a tour of inspection of the Psychiatric Institute and a visit to the New York State Training School for Boys at Warwick.

Each physician attending was provided with an excellent foundation upon which to build future neurological and psychiatric investigations.

The following physicians from the State Department of Mental Hygiene completed the course:

STATE HOSPITAL PHYSICIANS TAKING GRADUATE COURSE IN NEUROLOGY AND PSYCHIATRY, SEPTEMBER 30-DECEMBER 6, 1935

Harold A. Pooler
Albert S. Palombo
David Ruslander
Cecil L. Wittson
Forrest K. Anderson
Jess L. Bennett
Frank B. Glasser
A. Martin Gaulocher

Binghamton State Hospital
Brooklyn State Hospital
Buffalo State Hospital
Central Islip State Hospital
Craig Colony
Creedmoor State Hospital
Creedmoor State Hospital
Harlem Valley State Hospital

I. N. Wolfson	Hudson River State Hospital
A. J. Leader	Hudson River State Hospital
James A. Campbell	Kings Park State Hospital
Ernest Kusch	Manhattan State Hospital
H. L. Rachlin	Manhattan State Hospital
Gabriel Schein	Marcy State Hospital
Solomon Kleiner	Middletown State Hospital
William R. Webster	Pilgrim State Hospital
R. W. Southerland	Pilgrim State Hospital
Leonard Horn	Rochester State Hospital
Charlotte Munn	Rockland State Hospital
Alice D. Lynch	St. Lawrence State Hospital
Oswald J. McKendree	Utica State Hospital
Henry Luidens	Willard State Hospital
David S. Evans	Willard State Hospital

MICHAEL F. BRADLEY

Mr. Michael F. Bradley, steward of the Manhattan State Hospital, died at his residence at the hospital on August 23, after an illness of several months. He is survived by Mrs. Bradley and three sons.

Mr. Bradley was born in Newtown, Conn., October 20, 1866, a descendent of New England settlers of the early eighteen hundreds. He attended school in Newtown and later, after several years of advanced study, taught school for a short time. In 1888 he came to New York City and was appointed clerk and later bookkeeper at the New York Asylum for the Insane, then located on Hart's Island.

In 1897 he was appointed customs inspector at the Port of New York, but he returned to hospital work in 1900, as assistant steward for Manhattan State Hospital, East, on Ward's Island. Upon the consolidation of that hospital with Manhattan State Hospital, West, his position was abolished and he was appointed bookkeeper, but again rose rapidly, being appointed assistant paymaster in 1911 and assistant steward in 1916. On May 15, 1920, he was named steward of the Manhattan State Hospital, which position he held to the time of his death, thus completing 44 years in the service of the State of New York.

He was an active member of the hospital employees' association, and in 1904, when the wages of State hospital employees were below the general level, he aided in securing an increase. With representatives from other State institutions he worked toward legislation which in 1912 effected the State Hospital Employees' Retirement System. In 1918, when a board to manage that system was formed, Mr. Bradley was named as the representative of the employees. In 1920 the position was classified as that of an officer and he retired from this board, but he maintained his interest and enthusiasm and frequently consulted with others in an unofficial capacity.

Mr. Bradley had a wide acquaintanceship, particularly in the State hospital system, and was regarded by his associates, as well as his subordinates, as a conscientious and efficient employee and officer, loyal in service to the State, and a man of high personal qualities and genuine friendships.

NEWS AND COMMENT

—The thirteenth annual meeting of the American Orthopsychiatric Association will be held at the Statler Hotel in Cleveland, Ohio, February 20, 21, 22.

—Miss Hester B. Crutcher, since January, 1931, director of psychiatric social work in the New York State Department of Mental Hygiene, was given leave of absence on October 1, to accept the position of director of the division of delinquency in the Federal Children's Bureau in Washington, D. C.

—On November 5, a \$55,000,000 bond issue was passed by the voters of New York State. The fund is to provide relief for the suffering and hardships caused by unemployment. To this end, \$20,000,000 of this sum has been set aside for construction of buildings, works and improvements in State hospitals, State schools and other State institutions. Aside from serving the primary purpose of relief, this will tend to offset the increasing overcrowdedness of the institutions in the continuance of the building program begun in 1924.

—Dr. Leland E. Hinsie, assistant director of the Psychiatric Institute and Hospital, was named a member of the American committee for the first international conference on fever therapy, to be held in New York City in September of this year. Five national conferences have already been held in this country, the national conferences have already been held in this country, the first in 1931. The aim of this meeting will be to collect and crystallize data available in all countries that have been active in such therapeutic procedure. Abstracts of all the papers read at the conference will be translated into French, German and English.

—Dr. Siegfried E. Katz, senior psychiatrist at the Psychiatric Institute and Hospital, died at the Presbyterian Hospital in New York City, on December 14, at the age of 45. Dr. Katz was a native of Lithuania, who received the degrees of B. A. and M. S. from the University of Cichigan and his medical degree at the Harvard University Medical School. From 1917 to 1918, before studying medicine, he had been assistant in psychology at the University of Michigan. After his graduation from Harvard, he served an internship at Bellevue Hospital. He entered the New York State service at the Hudson River State Hospital, in 1929, and had been connected with the Psychiatric Institute and Hospital since 1931.

Dr. Katz published a number of papers on clinical neurology and psychiatry, psychopathology and abnormal psychology. He had been an instructor in psychiatry at Columbia University since 1930. Because of his broad training and interest in psychology, neurology and psychiatry, Dr. Katz was a particularly able physician and teacher. He had a sympathetic understanding of the problems of his patients and those who came under his care were grateful to him. His colleagues regret that his untimely death prevented the complete fruition of his labors.

Civil Service Eligible Lists for Positions in the Department of Mental Hygiene

Psychologist, Letchworth Village. List Established July 18, 1935

- Jacob Neches, 1678 53rd Street, Brooklyn, N. Y.
 Elaine F. Kinder, Letchworth Village.
 Philip S. Henderson, 621 Jerome Street, Brooklyn, N. Y.
 Willard F. Johnson, State Agricultural and Industrial School, Industry, N. Y.
 Hazel S. Clapp, 1 Serrano Avenue, Hawthorne, N. Y.
 Elizabeth McKay, The Training School, Vineland, New Jersey.
 Hyman Goldstein, 190 West Burnside Avenue, Bronx, N. Y.
 Dr. Solomon P. Rosenthal, 2033 66th Street, Brooklyn, N. Y.
 Georgiana C. Taft, Letchworth Village.
 James D. Page, 722 West 168th Street, New York City.
 Minnie Radner, 139 Linwood Street, Brooklyn, N. Y.
 Reha Rubin, Mountain View Avenue, care of Solomon, Nyack, N. Y.

Social Worker. List Established July 27, 1935

- Elizabeth Greene, 20 Sidney Place, Brooklyn, N. Y.
 Arlene R. Wolberg, Kings Park State Hospital.
 Lois W. Stephens, Manhattan State Hospital.
 Minnie Kaplan, 1020 Walton Avenue, New York City.
 Mabel Kirkpatrick, Utica State Hospital.
 Catherine Z. Franey, 56 Seminary Avenue, Binghamton, N. Y.
 Vera M. Smith, Staff Home, Central Islip, N. Y.
 Celia Korobow, 201 Stuyvesant Avenue, Brooklyn, N. Y.

Senior Assistant Physician. Promotion. List Established August 14, 1935

- Clarence L. Fessenden, Kings Park State Hospital.
 Henry D. Marritt, Gowanda State Hospital.

Benjamin A. Schantz, Middletown State Homeopathic Hospital.
Anna A. Gronlund, Marey State Hospital.
Emanuel Klein, Rockland State Hospital.
Elmer H. Bickle, Syracuse State School.
Oswald A. Kilpatrick, Rockland State Hospital.
Harold H. Dodds, Rockland State Hospital.
Albert S. Palombo, 681 Clarkson Avenue, Brooklyn, N. Y.
James A. Brussel, Pilgrim State Hospital.
Arthur J. Leader, Hudson River State Hospital.
Clifford E. Howard, Binghamton State Hospital.
James E. Brown, St. Lawrence State Hospital.
Rudolph Schwarz, Dannemora State Hospital.
John E. Edelstein, Harlem Valley State Hospital.
Solomon Kleiner, Middletown State Homeopathic Hospital.
Julius Barasch, Harlem Valley State Hospital.
Bruno G. Schutkeker, 300 Davidson Avenue, Buffalo, N. Y.
William H. English, Rochester State Hospital.
Lloyd E. Watts, Hudson River State Hospital.
William R. Carson, St. Lawrence State Hospital.
Stephen H. Abbate, Middletown State Homeopathic Hospital.
Ralph R. Harlow, Ward's Island, New York City.
Donald K. Schwartz, Marey State Hospital.
William R. Webster, Pilgrim State Hospital.
Isaac N. Wolfson, Hudson River State Hospital.
Israel M. Rossman, 400 Forest Avenue, Buffalo, N. Y.
Pompeo S. Milici, Kings Park State Hospital.
Ralph M. Towlen, Central Islip State Hospital.
David Ruslander, 400 Forest Avenue, Buffalo, N. Y.
Joseph J. Catalano, Kings Park State Hospital.
Marion Swezey, Gowanda State Homeopathic Hospital.
Victor Baer, Hudson River State Hospital.
Anna J. Gosline, Utica State Hospital.
Walter A. Thompson, Rockland State Hospital.
Herman Rickless, Creedmoor division, Brooklyn State Hospital.

Fire Inspector. List Established August 23, 1935

John P. Mern, 1744 E. 38th Street, Brooklyn, N. Y.
William H. McBride, C. C. C. Camp No. 3, Oxford, N. Y.
Charles H. Young, 3011 Beverly Road, Brooklyn, N. Y.
Floyd O. Dickinson, 27 Dennison Avenue, Binghamton, N. Y.

- Harry V. Gerling, 54 Montclair Avenue, Batavia, N. Y.
Francis A. Anderson, 204 Church Street, Freeport, N. Y.
William E. Walsh, Box 27, Hauppauge, N. Y.
Wigbert Pfeffer, 24 Jackson Street, Rochester, N. Y.
Matthew Roshirt, Nassau, N. Y.
Charles M. Fales, 92 Clove Avenue, Haverstraw, N. Y.
John J. Hayden, 124 Warren Street, Hudson, N. Y.
Michael J. Connerton, 69 Mohegan Park Avenue, Dobbs Ferry, N. Y.
Chalmers Mern, 255 79th Street, Brooklyn, N. Y.
Richard R. Prenot, Clinton Street, Napanoch, N. Y.
Wendell Townley, 56 Hyde Boulevard, Ballston Spa., N. Y.
Joseph W. Oths, 235 Battle Avenue, White Plains, N. Y.
Herman Redmond, St. Lawrence State Hospital.
George S. Ahrens, 60-62 56th Street, Maspeth, L. I., N. Y.
Earle F. Romer, 414 New Scotland Avenue, Albany, N. Y.
William J. LaBarge, 13 Fair Street, Oneonta, N. Y.
George W. Heermance, 4 Green Street, Hudson, N. Y.
Tracy R. Pearsall, 22 Brown Street, Babylon, N. Y.
Joseph G. Fallon, Gowanda State Homeopathic Hospital.
Gerald J. Sprague, 32 Eaton Street, Hamilton, N. Y.
John A. Smith, 219 Jamestown Street, Gowanda, N. Y.
Frederick F. Heybruck, 71 Abeel Street, Kingston, N. Y.
Charles R. McDermott, 89 Meadowbrook Road, Merrick, N. Y.
Alexander Bullock, 22 Jefferson Avenue, Lynbrook, N. Y.
Alfred T. Riciuto, 70-12 53rd Drive, Maspeth, L. I., N. Y.
Joseph N. Pauker, 5th Bombardment Squadron, U. S. Army Air Corps,
Mitchell Field, Hempstead, N. Y.
Frederick E. Combs, 49 Mountain Street, Whitehall, N. Y.
William Sands, East View, N. Y.
Ralph J. Edwards, 340 Montgomery Street, Syracuse, N. Y.
Geo. H. Rausch, 3 West Street, Whitesboro, N. Y.
William O. Arnold, 507 West Main Street, Patchogue, L. I., N. Y.
Kurt M. Gunther, Jefferson Avenue, St. James, L. I., N. Y.
Russell W. Lawson, 24 Mosley Street, Whitesboro, N. Y.
Everett A. Weaver, 26 Brainard Street, Whitesboro, N. Y.
Samuel Schoen, 1507 St. John's Place, Brooklyn, N. Y.
Clarence E. Aker, North Country Road, St. James, L. I., N. Y.
Raymond W. Kenny, 40 Cayuga Street, Cohoes, N. Y.
E. Raymond Hale, 441 So. Massey Street, Watertown, N. Y.
Edward J. Allen, 53 Rose Avenue, Harrison, N. Y.

- Frederick W. Weis, Jr., Jefferson Avenue, Deer Park, L. I., N. Y.
Alfred O. Bartlett, 16 Montour Street, Binghamton, N. Y.
Joseph J. Klaus, Sunset Place, Hawthorne, N. Y.
Harold J. McCullough, Moira, N. Y.
Walter T. Geronimo, 310 Locust Avenue, Port Chester, N. Y.
Herbert W. Jones, Box 3, Marcy, N. Y.
Charles J. Trenkle, Central Islip State Hospital.
Lawrence T. Boesen, Jr., 8829 Ft. Hamilton Parkway, Brooklyn, N. Y.
Richard E. King, 79 Elysian Avenue, Nyack, N. Y.
Charles K. Wygant, Gowanda State Homeopathic Hospital.
Floyd A. Gates, Box 236, Natural Bridge, N. Y.
Edward J. Matthews, 6 Main Street, Thomson, N. Y.
Paul T. Pautler, Transit Road, East Amherst, N. Y.
Theodore J. Schening, 545 Roslyn Street, Islip Terrace, N. Y.
Owen E. Ford, 13 Niagara Street, Canandaigua, N. Y.
John C. Staats, Kings Park State Hospital.
Frank Lyons, Manhattan State Hospital.
Howard L. Frank, 2409 Avenue B, Schenectady, N. Y.
Carroll H. Best, Park Road, Castile, N. Y.
Charles J. Lawlor, Pine View Boulevard, Central Islip, N. Y.
Thomas W. Harris, 471 78th Street, Brooklyn, N. Y.
John Joseph McGinn, 322 East 240th Street, Bronx, N. Y.
Homer S. Hickok, Spring Street, Collins, N. Y.
Arthur E. Taylor, Center Street, Forestville, N. Y.
Lawrence E. Bool, 804 N. Tioga Street, Ithaca, N. Y.
Alvah Horton, Kings Park, N. Y.
Peter J. Schermerhorn, 520 Hamilton Street, Albany, N. Y.
Gerard J. O'Donoghue, 94 Depot Place, Nyack, N. Y.
Melvin Smith, 46 Liberty Street, Middletown, N. Y.
William T. Clair, Northern Parkway, Hempstead, N. Y.
Othmer H. Chapman, Lacona, N. Y.
George A. Tetrault, Box 322, Kings Park, L. I., N. Y.
Henry G. Carpenter, 237-30 Davenport Avenue, Bellerose, L. I., N. Y.
Joseph C. Papesy, Box 242, White Plains, N. Y.
William B. Tulek, 162 E. 7th Street, New York City.
David J. O'Sullivan, 106 72 Street, Brooklyn, N. Y.
George D. McDonough, 144 Church Avenue, Ballston Spa., N. Y.

Assistant Social Worker. List Established September 5, 1935

Frances T. Pearson, 485 Westcott Street, Syracuse, N. Y.
Elizabeth C. Rokey, 1008 Pickering Street, Ogdensburg, N. Y.
Carolyn M. Newell, 207 W. Pine Street, Rome, N. Y.
Mrs. Dorothy L. Walker, Kings Park State Hospital.
Ruth C. Terry, Tower Avenue, Waterville, N. Y.
L. Enid Brown, Rockland State Hospital.
Marian P. Hayes, Kings Park State Hospital.
Elizabeth K. Walker, Pilgrim State Hospital.
Ethel L. Rourke, Box 243, N. Stamford Avenue, Stamford, Conn.
Frieda Mikel, 350 West 85th Street, New York City.
Marian E. Whitehead, Hudson River State Hospital.
Marjorie J. Filkins, United States Hospital, Batavia, N. Y.
Mary B. Martin, 961 Davis Street, Elmira, N. Y.
Bernice C. Crosby, 268 W. Kennedy Street, Syracuse, N. Y.
Marjorie O. Ward, 228 North Goodman Street, Rochester, N. Y.
Mary K. Fenton, Kings Park State Hospital.
David W. Blauston, 4608 10 Avenue, Brooklyn, N. Y.
Zoe Margolin, 1589 Ocean Avenue, Brooklyn, N. Y.
Helen R. Gillespie, Eastchester Neighborhood, Tuckahoe, N. Y.
Ruth H. Thompson, Rockland State Hospital.
Mary E. Graham, Rockland State Hospital.
Dorothy Morris, 1739 Montgomery Avenue, Bronx, N. Y.
Ruth Goldsmith, 1439 Ocean Avenue, Brooklyn, N. Y.
Claire Coventry, Rome State School.
Mary A. Johnson, Hudson River State Hospital.
Doris L. Murphy, Box 327, Rome, N. Y.
Mary E. O'Connor, 505 New York Avenue, Ogdensburg, N. Y.

*Proofreader. Promotion. Utica State Hospital. List Established
September 23, 1935*

Anna K. Lee, Utica State Hospital.
George L. Cantzlaar, Utica State Hospital.

Child Guidance Clinic Worker. List Established October 5, 1935

Ruth P. Montgomery, 35 Academy Street, Albany, N. Y.
Jesse J. Carlson, Aurora-on-Cayuga, N. Y.
A. Caroline Schmehl, 800 S. Wilbur Avenue, Syracuse, N. Y.
Samuel Goldberg, 1460 Bryant Avenue, Bronx, N. Y.

Jacob Neches, 1678 53rd Street, Brooklyn, N. Y.
 Georgiana C. Taft, Letchworth Village.
 Sylvia L. Hotchkiss, Pilgrim State Hospital.
 Ruth Sarason, Albion State Training School, Albion, N. Y.
 David Kaplun, 1900 Grand Concourse, Apt. 5-C, Bronx, N. Y.
 Joseph N. Feuerburgh, 3708 Clay Avenue, Bronx, N. Y.
 Elizabeth K. Walker, Pilgrim State Hospital.
 Hazel E. Wertman, 50 Nevins Street, Brooklyn, N. Y.
 Chauncey E. Martin, 1858 Davis Street, Elmira, N. Y.
 Hyman Goldstein, 190 W. Burnside Avenue, Bronx, N. Y.
 Max Cooper, 1547 Longfellow Avenue, Bronx, N. Y.
 Ryah B. Reisley, 345 West 86th Street, New York City.
 Seymour M. Blumenthal, 2214 64th Street, Brooklyn, N. Y.

Chief Occupational Therapist. List Established October 23, 1935

Frances M. Nicoll, 600 East 116th Street, New York City.
 Mariella Zizler, Letchworth Village.
 Elisabeth Walls, Westfield State Farms, Bedford Hills, N. Y.
 Matilda R. Remsen, Pilgrim State Hospital.
 Elizabeth S. Morse, Wassaic State School.
 Mabel H. Davis, Rockland State Hospital.

*Stenographer, First Grade. Promotion. Rockland State Hospital. List
 Established October 23, 1935*

Pauline E. Marks, Rockland State Hospital.
 Mary R. McInerney, Rockland State Hospital.
 Anne M. Foley, 86 W. Broadway, Nyack, N. Y.
 Jean A. McMickle, Rockland State Hospital.
 M. Rita Moore, Rockland State Hospital.

*Principal Account Clerk. Promotion. Bureau of Audit and Finance,
 Albany Office. List Established November 2, 1935*

Winifred A. Dunnigan, 253 Delaware Avenue, Albany, N. Y.
 Rose P. Barker, 1801 9th Avenue, Watervliet, N. Y.
 Janet Macfarlane, 181 Kent Street, Albany, N. Y.

*Steward. Promotion. Various Institutions. List Established
December 19, 1935*

Lowell J. Greenier, Orangeburg, N. Y.
 John M. Reardon, Ward's Island, New York City.
 Samuel H. Peltz, 681 Clarkson Avenue, Brooklyn, N. Y.
 Hans Wiedenkiller, Suffolk Avenue, Central Islip, N. Y.
 Thomas F. Murphy, Harlem Valley State Hospital.
 Serdo J. Davignon, Pilgrim State Hospital.
 George W. Seism, Winchester Boulevard, Queens Village, L. I., N. Y.
 Fred W. Hitchcock, Sonyea, N. Y.
 C. Cornelius Colesanti, 113 Monhagen Avenue, Middletown, N. Y.
 Frederick T. Lawson, Gowanda State Homeopathic Hospital.
 Mrs. Mary E. Kenney, Letchworth Village.
 Percy V. Campfield, Wassaic State School.
 Mrs. Marguerite T. Olmstead, Hudson River State Hospital.
 Samuel Cohen, Rockland State Hospital.
 James A. Sandburg, St. Lawrence State Hospital.
 Joseph Hendrick Anderson, 34 Glenwood Street, Albany, N. Y.

Assistant Physician. List Established December 21, 1935

Robert C. Hunt, State Hospital, 1600 South Avenue, Rochester, N. Y.
 Harold Kelman, Montefiore Hospital, Gun Hill Road, Bronx, N. Y.
 Edward Holtz, Pilgrim State Hospital.
 Edward J. Humphreys, Letchworth Village.
 Sidney Tarachow, Mt. Sinai Hospital, New York City.
 Charles Kleiman, Marcy State Hospital.
 Emanuel E. Harkavy, 901 Lexington Avenue, New York City.
 Harold A. O'Connor, Creedmoor State Hospital.
 Conrad O. Ranger, Harlem Valley State Hospital.
 Ed. Rucker Clardy, Rockland State Hospital.
 Leslie P. Adams, 681 Clarkson Avenue, Box 51, Brooklyn, N. Y.
 Malvina T. Lemmle, Hospital Station, Binghamton, N. Y.
 Isidore I. Weiss, Bellevue Hospital, 1st Avenue at 26th Street, New York City.
 Robert A. Savitt, 720 West End Avenue, New York City.
 George W. T. Watts, Letchworth Village.
 Herman B. Snow, State Hospital, Binghamton, N. Y.
 Mark Zeifert, 681 Clarkson Avenue, Brooklyn, N. Y.
 James A. Taylor, Kings Park State Hospital.

Viola G. Huddart, Station "B", Poughkeepsie, N. Y.
DeWitt C. Brown, Central Islip State Hospital.
Henriette R. Klein, 722 W. 168th Street, New York City.
Walther H. Thiele, 150 West Main Street, Gowanda, N. Y.
A. Lionel Kase, 1367 Sterling Place, Brooklyn, N. Y.
Joseph J. Doltolo, Station "B", Poughkeepsie, N. Y.
James Gaetaniella, Wingdale, N. Y.
Joseph C. Weisman, Manhattan State Hospital.
Mario A. Di Giovanna, Orangeburg, N. Y.
James E. Rappa, 681 Clarkson Avenue, Brooklyn, N. Y.
Grace E. McLean, Middletown State Homeopathic Hospital.
Madelin R. Perry, 529 Church Street, Newark, N. Y.
Leonora L. Greteman, Rome State School.
Carmelo J. Chiarello, 681 Clarkson Avenue, Brooklyn, N. Y.

Contracts Awarded

The following contracts have been awarded by the Commissioner, Department of Mental Hygiene, from July 1 to December 31, 1935:

July 17.

For sewers and water lines, assembly hall, Creedmoor State Hospital, to the Pilot Construction Corporation, Jamaica, N. Y., for \$3,988.

July 18.

For sanitary work, superintendent's apartment, Brooklyn State Hospital, specification No. 8591, to the Astoria Heating Company, Woodside, L. I., N. Y., for \$1,674. (Formerly awarded to S. L. Snyder at \$1,941.)

July 22.

For roads and grading, Harlem Valley State Hospital, to Vernon Christians, Jr., Poughkeepsie, N. Y., for \$17,124.40.

July 27.

For sewers and water lines, farm colony buildings, Pilgrim State Hospital, to the Pilot Construction Corporation, Jamaica, N. Y., for \$7,516.

For interior painting, superintendent's residence, school building and administration building, Wassaic State School, specification No. 8627, to The Circle Painting, Inc., New York City, for \$4,900.

August 5.

For heating work, kitchen equipment, reception building No. 60, etc., Gowanda State Hospital, specification No. 8512, to the Barr & Creelman Engineers and Contractors Corp., Rochester, N. Y., for \$2,071.

For sanitary work, kitchen equipment, reception building, etc., Gowanda State Hospital, specification No. 8513, to Melvin A. Speth, Buffalo, N. Y., for \$2,000.

For equipment, kitchen equipment, reception building, etc., Gowanda State Hospital, specification No. 8514, to S. Blickman, Inc., Weehawken, N. J., for \$33,974.

For bakery ovens, machinery, etc., Gowanda State Hospital, specification No. 8557, to the I. J. White Company, New York City, for \$25,385.

August 12.

For coal handling apparatus, Rome State School, specification No. 8608, to Gifford-Wood Company, Hudson, N. Y., for \$19,364.

For heating work, power house equipment, Rome State School, specification No. 8607, to the Dierks Heating Company, Inc., New York City, for \$55,300.

August 26.

For sprinkler work and storm relief ewers, Binghamton State Hospital, (no specification No.) to Joseph Brendese, Troy, N. Y., for \$22,344.25.

September 6.

For elevator car, shaft D, building No. 10, Brooklyn State Hospital, specification No. 8678, to the Otis Elevator Company, Brooklyn, N. Y., for \$795.

For special electric fixtures, farm colony building No. 76, Pilgrim State Hospital, specification No. 8637, to the Perfeelite Company, Cleveland, Ohio, for \$261.85.

For interior painting, Rockland State Hospital, specification No. 8657, to the Gregory Ferend Company, Inc., New York City, for \$7,339.

September 9.

For driven wells, Creedmoor State Hospital, to the C. W. Lauman & Co., Central Park, N. Y., for \$12,441.50.

September 12.

For construction work, staff accommodations, Utica State Hospital, specification No. 8640, to H. R. Beebe, Inc., Utica, N. Y., for \$49,632.

For heating work, staff accommodations, Utica State Hospital, specification No. 8641, to H. Sand & Company, Inc., New York City, for \$4,485.

For sanitary work, staff accommodations, Utica State Hospital, specification No. 8642, to Worsfold & Hawvermale, Inc., Nyack, N. Y., for \$4,096.

For electric work, staff accommodations, Utica State Hospital, specification No. 8643, to Earl G. Williams, Utica, N. Y., for \$1,079.

For special electric fixtures, staff accommodations, Utica State Hospital, specification No. 8668, to The Simes Company, New York City, for \$339.
September 16.

For painting buildings Nos. 6, 8, 9 and 10, Brooklyn State Hospital, specification No. 8667, to the Browning Decorating Company, Inc., New York City, for \$23,700.

September 19.

For waterproofing buildings E, F, G and No. 3, Marcy State Hospital, specification No. 8695, to the Building Chemicals Corporation, New York City, for \$16,300.

For waterproofing, buildings Nos. 1, 2, 3, 4 and 5, Pilgrim State Hospital, specification No. 8692, to the A. C. Horn Corporation, Long Island City, for \$16,300.

September 23.

For ventilating hoods, patients' dining room and kitchen and employees' building, Craig Colony, Sonyea, N. Y., specification No. 8684, to The Arkay Company, New York City, for \$1,695.

October 1.

For interior painting, Gowanda State Hospital, specification No. 8694, to the Vassilaros Contracting Company, New York City, for \$24,635.

October 7.

For replacement of wood doors, buildings 6, 8, 9 and 10, Brooklyn State Hospital, specification No. 8717, to The Lundin Halwer Corporation, New York City, for \$8,772.

October 9.

For interior painting, Kings Park State Hospital, specification No. 8665, to William Mooseman, Inc., Brooklyn, N. Y., for \$26,500.

October 14.

For sewers and water lines, Utica State Hospital, to the N. D. Peters & Co., Inc., Utica, N. Y., for \$6,338.25.

October 18.

For refrigeration work, farm colony, building No. 76, Pilgrim State Hospital, specification No. 8650, to the Arotic Engineering Co., Inc., New York City, for \$2,873.

October 21.

For repairs to sewage disposal plant, Letchworth Village, to Clarence J. Seaton, Haverstraw, N. Y., for \$16,732.

For 12-inch pipe line—water line—Gowanda State Hospital, to Bruno Trimpoli, Schenectady, N. Y., for \$10,193.

For roads, walks, grading, Pilgrim State Hospital, to the J. J. Belotte & Son Construction Company, Troy, N. Y., for \$123,160.70.

October 28.

For construction work, married employees' building (QM and tunnel), Wassaic State School, specification No. 8685, to the W. E. Wark Company, Inc., Philadelphia, Penna., for \$129,550.

For heating work, married employees' building (QM and tunnel), Wassaic State School, specification No. 8686, to the Dierks Heating Company, Inc., New York City, for \$8,900.

For sanitary work, married employees' building (QM and tunnel), Wassaic State School, specification No. 8687, to Barr & Creelman Engineers and Contractors Corp., Rochester, N. Y., for \$15,532.

For electric work, married employees' building (QM and tunnel), Wassaic State School, specification No. 8688, to Fischbach & Moore, Inc., Albany, N. Y., for \$4,950.

For electric fixtures, married employees' building (QM and tunnel), Wassaic State School, specification No. 8689, to the Ferro Art Company, Inc., New York City, for \$181.25.

For miscellaneous additional work, Brooklyn State Hospital, specification No. 8719, to Arnold M. Diamond, Brooklyn, N. Y., for \$1,770.

For sewage disposal, Craig Colony, to the Potter-DeWitt Corp., Pavilion, N. Y., for \$13,591.50.

October 31.

For special electric fixtures, infirmary building, Brooklyn State Hospital, specification No. 8784, to the Ferro Art Company, Inc., New York City, for \$285.70.

For replacement of service piping, heating work, Willard State Hospital, specification No. 8707, to the John W. Danforth Company, Buffalo, N. Y., for \$4,074.

For replacement of underground electric conduit system, Willard State Hospital, specification No. 8708, to the T. H. Green Electric Company, Rochester, N. Y., for \$940.

November 2.

For repairs to smoke stack, power house, etc., Brooklyn State Hospital, specification No. 8701, to the Alphons Custodis Chimney Construction Company, New York City, for \$460.

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November 12.

For interior painting, assembly hall, Central Islip State Hospital, specification No. 8666, to Edward Levy, Kings Park, N. Y., for \$10,970.

For waterproofing building No. 37, Kings Park State Hospital, specification No. 8754, to the Building Chemicals Corp., New York City, for \$2,460.83.

November 26.

For construction work, assembly hall and service connections, Brooklyn State Hospital, specification No. 8375, to Charles B. Saxon, Inc., New York City, for \$113,844.

For heating work, assembly hall and service connections, Brooklyn State Hospital, specification No. 8376, to the Astoria Heating Company, Woodside, N. Y., for \$15,164.

For sanitary work, assembly hall and service connections, Brooklyn State Hospital, specification No. 8377, to the R. T. Frye & Company, New York City, for \$7,900.

For electric work, assembly hall and service connections, Brooklyn State Hospital, specification No. 8378, to H. Z. Altberg, Inc., New York City, for \$15,200.

For special electric fixtures, assembly hall, Brooklyn State Hospital, specification No. 8379, to The Simes Company, Inc., New York City, for \$1,495.

For waterproofing, Pilgrim State Hospital, specification No. 8678, to the Building Chemicals Corp., New York City, for \$51,745.

For sheet metal gutters, leaders and flashings, Pilgrim State Hospital, specification No. 8691, to the G. R. McNulty Company, Inc., Huntington Station, N. Y., for \$26,499.

November 29.

For construction work, staff accommodations, Middletown State Hospital, specification No. 8738, to C. J. Seaton, Haverstraw, N. Y., for \$50,932.

For heating work, staff accommodations, Middletown State Hospital, specification No. 8739, to Worsfold & Hawvermale, Inc., Nyack, N. Y., for \$3,767.

For sanitary work, staff accommodations, Middletown State Hospital, specification No. 8740, to Worsfold & Hawvermale, Inc., Nyack, N. Y., for \$3,242.

For electric work, staff accommodations, Middletown State Hospital, specification No. 8741, to W. H. Straut Company, Inc., Haverstraw, N. Y., for \$1,278.

For special electric fixtures, staff accommodations, Middletown State Hospital, specification No. 8742, to Shapiro & Aronson, Inc., New York City, for \$238.50.

November 30.

For heating work, kitchen equipment, Rockland State Hospital, specification No. 8703, to Worsfold & Hawvermale, Inc., Nyack, N. Y., for \$1,347.

For sanitary work, kitchen equipment, Rockland State Hospital, specification No. 8704, to Worsfold & Hawvermale, Inc., Nyack, N. Y., for \$1,933.

For equipment, kitchen equipment, Rockland State Hospital, specification No. 8705, to The Arkay Company, New York City, for \$29,179.

December 2.

For interior painting, buildings Nos. 12, 19, 20 and 21, Creedmoor State Hospital, specification No. 8757, to Wendt & Lott, Far Rockaway, N. Y., for \$4,000.

December 5.

For electric work, service connections, staff accommodations, Utica State Hospital, specification No. 8758, to Langdon & Hughes Construction Company, Utica, N. Y., for \$6,990.

December 17.

For guard reinforcement and guard lock bolts, Creedmoor State Hospital, specification No. 8783, to Gottlieb Iron Works, Inc., Brooklyn, N. Y., for \$1,889.

For interior painting, building No. 61, Letchworth Village, specification No. 8798, to J. J. Shaw, Haverstraw, N. Y., for \$1,450.

For acoustical work in building No. 63, Pilgrim State Hospital, specification No. 8762, to the Acoustical Installation Corp., New York City, for \$1,987.

December 19.

For construction work, industrial building, propagating house, truck storage, farm storage and utility storage building, Pilgrim State Hospital, specification No. 8768, to the Caye Construction Company, Inc., Brooklyn, N. Y., for \$244,800.

For heating work, industrial building, propagating house, truck storage, farm storage and utility building, Pilgrim State Hospital, specification No. 8769, to the Astoria Heating Company, Woodside, N. Y., for \$13,500.

For sanitary work, industrial building, propagating house, truck storage, farm storage and utility storage building, Pilgrim State Hospital, specification No. 8770, to R. T. Frye & Company, New York City, for \$9,400.

For electric work, industrial building, propagating house, truck storage, and utility storage building, Pilgrim State Hospital, specification No. 8771, to Charles A. Mulligan, Central Islip, N. Y., for \$18,740.

For electric elevator, industrial building, Pilgrim State Hospital, specification No. 8793, to the Otis Elevator Company, Brooklyn, N. Y., for \$3,270.

December 28.

For construction work, assembly hall, Pilgrim State Hospital, specification No. 8779, to Hanna Bros., Inc., New York City, for \$177,237.

For heating work, assembly hall, Pilgrim State Hospital, specification No. 8780, to Almirall & Company, Inc., New York City, for \$33,591.

For sanitary work, assembly hall, Pilgrim State Hospital, specification No. 8781, to R. T. Frye & Company, New York City, for \$7,765.

For electric work, assembly hall, Pilgrim State Hospital, specification No. 8782, to Goodrich Electrical Inst. Company, Inc., New York City, for \$14,943.

NEWS OF THE STATE INSTITUTIONS FOR THE HALF-YEAR PERIOD FROM JULY 1, 1935 TO DECEMBER 31, 1935

NEW INSTITUTION FEATURES, ADMINISTRATION, CONSTRUCTION, IMPROVEMENTS, ETC.

STATE HOSPITALS

BINGHAMTON

Contract for storm water sewer was awarded to Joseph Brendese, Troy, N. Y., in the sum of \$22,344.25. Work on this contract was begun but, owing to the cold weather and the subsequent freezing of the ground, it was discontinued for the winter months.

Contract for repairing roof in the center of the main building was awarded to Sullivan and Lent of Binghamton, in the sum of \$870. This work has been completed.

The employees' dining room at Fairmount has been enlarged. New floor has been laid, walls repainted, and new china cupboard installed.

Hospital mechanics have begun the work of remodeling the stenographers' office on the second floor of the main building and converting it into a new steward's office. A concrete fireproof vault has been built. When these changes are completed it is intended to move the medical library to the old steward's office. The present medical library and visitors' room will be occupied by the medical and clerical force.

Two special fund electric workers have begun the work of rewiring the north building, the hospital having received an appropriation of \$3,500 for this work.

New sides, top screenings and hand rails have been placed on the fire escapes at the south and west buildings.

A new basal metabolism machine has been purchased and placed in the diagnostic clinic.

New water lines to frigidaires at the east, Broadmoor and main buildings and new hot water line to diet kitchen, ward 74, Wagner Hall, have been installed.

Twenty-five Norway maples and 25 American elms were purchased and set about the hospital grounds to replace those destroyed by blight and storms.

BROOKLYN

The new five-family staff house was occupied during the month of October.

The new multi-storied infirmary building has been completed. On November 14 the kitchen and cafeteria for employees were opened. On November

21, 125 male bed patients were transferred to that building from the east and reception units. During the month of December additional wards were opened and the census increased to 339 patients. The sickbay for male employees in the east building and that for female employees in the west building were moved to building 10 on November 27.

A new greenhouse composed of two wings and a central brick work-room was completed during the early part of December.

A new brick enclosed yard for materials has been constructed between the laundry and shop buildings.

A new concrete reinforced retaining wall has been constructed in front of the mat shop.

Concrete roads with curbs and new concrete walks have been completed to the various entrances to building No. 10.

New conduit lines with cable were installed between Clarkson Avenue and the sub-basement of building 10 for the purpose of supplying alternating current from the lines of the Brooklyn Edison Company to the X-ray and physical therapy departments.

Construction work on the apartment for the superintendent in building 10 was practically completed during December.

A contract was awarded to the Browning Paint Company on September 19, for interior painting buildings 6, 8, 9 and 10, which work was practically completed at the end of December.

A contract was awarded during the month of November, and repairs completed to the smoke stack at the power plant.

BUFFALO

Renovation of wards which has been carried on for several months by welfare workers furnished by the T. E. R. A., has been completed. All welfare workers were withdrawn from the hospital projects on December 1.

The second floor of the men attendants' home has been renovated and this completes the work of all buildings at the hospital occupied by patients or employees.

To facilitate the unloading of cars in the coal shed, the tracks were relaid and cement was placed between and adjoining the tracks.

CENTRAL ISLIP

The contract with P. Tomasetti Contracting Corporation for construction of a sewage disposal plant was advanced to 99 per cent of completion. The plant has been in complete operation since last September.

The contract calling for waterproofing of 11 buildings in the new group was completed in November.

The contract with Mossman and Tuller Painting and Decorating Corporation, calling for interior painting of the buildings in the new group, was completed in October.

The contract with L. I. Waldman Company, Inc., for additional water supply was advanced to 78 per cent of completion.

Construction of a brick and concrete grandstand on the athletic field was started in September. It is now 40 per cent completed.

CREEDMOOR

The contract for the assembly hall made reasonably good progress. Construction work is considered 55 per cent advanced, electrical, 40 per cent, heating, 45 per cent and sanitary, 44 per cent.

Contract was let for a new deep well and the work was begun in December.

A new Peel oven at the bakery was constructed and is in use.

With special fund monies the repair of brick work, etc., kitchen, building 2 is considered about one-third complete.

A new dental office was opened in the basement of building R to care for disturbed patients of buildings R and S.

An emergency service electric cable was installed connecting buildings R, S and kitchen 3.

Hoods, suction fan and electric heaters were installed in the hair-picking shop.

Snow guards were installed on buildings with pitched roofs and hung gutters.

Sheet copper roofing was installed on sun porches of cottages 2, 4 and 5, replacing canvas covers.

At the beginning of the period we were being supplied with relief labor through the T. E. R. A. In November we received an allotment of Federal money under the W. P. A. With this relief labor we have been replastering walls in buildings O and P, and this work is considered approximately 65 per cent complete. We have been repairing the brick walls, parapets, etc., of buildings R, S, N and kitchen 3, and this work is now approximately two-thirds finished. Considerable grading has been done, particularly south of building N, where 258 linear feet of curbing was installed and 451 linear feet of concrete walk. A new cess pool was constructed and connected with the farm cottage.

Considerable exterior and interior painting has been done and during the past month, the work of replacing Johns-Mansville conduit for steam and hot water lines with a walking concrete tunnel, was started.

GOWANDA

The W. P. A. project No. 42430 undertakes the construction of approximately $2\frac{1}{2}$ miles of road, servicing the new buildings under construction and grading about the same buildings. Work was begun November 26 with some 70 men detailed from the local relief rolls.

Under the management of Camp Frontier, located on the hospital reservoir property, in the town of North Collins, a T. E. R. A. project, a work program is developed, which includes clearing of woodlands, construction of roads and pathways through the woods, the development of fire lanes, repair of drainage ditches along the main highway, west of the hospital buildings, and drainage ditches in the woods. Other work contemplated will undoubtedly keep some 80 men from this camp engaged for approximately a year.

In order to develop a more potable drinking water and to reduce undesirable qualities present, an aerator was installed at the filter plant; also automatic feeds for lime and ammonia. Considerable trouble has been experienced in the past few years owing to the overgrowth of algae and other vegetation, changing the color, taste and the odor of this water.

The general construction begun in 1933, for the development of 16 new buildings, including a power house, reception hospital, buildings for infirm and continued treatment patients, kitchen, cafeteria, staff quarters for eight physicians, two nurses' homes for single employees and one for married couples, has been practically completed. At the present time contracts for the equipping of the new bake shop, kitchen and cafeteria are completed as follows:

	Per cent complete
Bakery equipment	16
Kitchen equipment	90
Sanitary work	55
Heating work	20

HUDSON RIVER

Two 1,000,000-gallon water supply tanks were completed at our system at the cottage department. This project also provides two new groups, venturimeter and manometer, and is completed with the exception of the controlling equipment which is about 90 per cent completed.

One 860 H. P. boiler was installed at the power house. This boiler is an Erie City, 4-drum, 3-pass, vertical, 8,600 square feet capacity, and is complete with Hagen control, boiler feed pumps, compressors, stoker equipment, feed water regulators and auxiliaries to boiler. This boiler is now operating.

A new electric generator has been installed and is about 98 per cent completed.

The new rapid filters system is completed and in operation. This work included new rapid filters and an aerator house, chlorinators and ammonia-tors, alum machines and low lift pumps.

A considerable amount of plumbing has been done at Lakeview and new water lines have been installed. This project will amount to about \$3,000 and is about 60 per cent completed.

The electrical department has installed street lights from cottage 8 to cottage 9 and from cottage 2 to a point near Cleveland Home. Street lights were also installed at the Winslow farm.

A new carpenter shop was erected at Edgewood to replace an old one that was destroyed by fire.

A new five-car garage was erected at staff house No. 2, replacing one which was in very bad condition.

Concrete sidewalks were laid at Ryon Hall, staff house No. 4, Poucher Hall and the male home.

A new waiting room, 22x12 feet, for patients attending clinics at the X-ray and physical therapy department has been completed.

A cafeteria service at Inwood has been installed and is now in operation, and a cafeteria is now being completed for the employees at central group. All of our cafeteria sheet metal work and necessary plumbing for the counters, dishwashing machines, etc., were made by the plumbing department except the inserts. At the present time about 41 per cent of our patient population is served by the cafeteria system, and it is planned to extend this service to other buildings not having the system.

KINGS PARK

The new infirmary for women, known as ward 50, was officially opened August 21, increasing the capacity for women by 102.

The new storehouse was opened for use, August 22, 1935.

Contract for the interior painting of the large continued group to house 1,320 patients, was awarded to William Mooseman, Inc., Brooklyn, N. Y., for \$26,500.

Work on the following contracts is still in progress:

Four artesian wells.

Sewage disposal plant.

Bakery equipment.

Cottages 22, 23 and 24 have been demolished, being unsafe for use.

W. P. A. funds have been allotted to the hospital in the amount of approximately \$90,000 for the completion of walks and curbs on upper boulevard; interior and exterior painting; repairing of cornices and flashings, groups 1, 2, 3 and 5; metal gutters and leaders, physicians' cottages 1, 2, 3, 4 and 5; demolition of cottages 22, 23, 24 and 28, exterior repairs consisting of slate roofs, copper gutters and leaders, dormers and cupolas and exterior painting of buildings A, B, C and D.

A cinder road has been built from the new storehouse to the town highway.

MANHATTAN

Removed brick and slate towers from over wards 3 and 4, south end, and tied back roof rafters, correcting a leaning condition caused by undermining foundation during service tunnel construction.

MARCY

Two allotments, one for \$9,924 and another for \$4,550 were made by the T. E. R. A., for the development of lawns. A third allotment of \$42,140 has been made by the W. P. A., and two per cent of this allotment has been expended.

Partitions have been constructed at one end of four dining rooms in the female side of the west group dining rooms which are not needed for food service. One of these rooms will be used for a nurses' lecture room, one for a muscle training exercise room and the other two will be used for physical exercises following walking parties.

A cafeteria counter is being installed in the patient's dining room of building A and a new diet kitchen is also being constructed in this building.

Concrete hot beds are being constructed at the propagation house. This work is being done with W. P. A. labor and is 60 per cent completed.

A T. E. R. A. project for the renewal of the domestic hot water lines which is about 84 per cent completed, was temporarily halted on November 27, pending the taking over of this project by the W. P. A.

An allotment of \$4,198.14 has been made by the W. P. A. for interior painting of buildings C and D.

A maple syrup house has been constructed at the farm and an evaporator installed.

An addition to the root cellar at the farm was constructed with T. E. R. A. funds and is 100 per cent completed.

Rustic sign posts have been placed at the various road intersections.

A new tool house has been constructed at the rear of building G.

MIDDLETOWN

The reconstruction of pavilion I and Talcott Hall has now been completed and the wards have been reoccupied by women patients.

The contract for the construction of five staff cottages has been started under the supervision of the general contractor, C. J. Seaton.

A new tile floor has been constructed in the grill formerly used for employees and this has now been reopened and will feed approximately 500 women patients from the main building, pavilion I and Talcott Hall.

PILGRIM

On August 27, building 22, male reception service, was opened by the transfer of 22 patients from a continued treatment service. Kitchen and dining room, building 21, were opened the same day.

On August 28, building 24, female reception service, was occupied by 25 continued treatment patients, who will assist in preparing it for the later reception of new patients.

Other buildings were occupied as follows:

- September 12—Building 72, nurses' home (male nurses)
- September 14—Building 27, south, senior assistant physician
- September 17—Apartment 58, center, senior assistant physician
- October 3—Building 23, acute medical cases
- December 23—Building 28, south, senior assistant physician

The following groups of ambulatory continued treatment patients were received from Manhattan State Hospital:

- November 12—88 females
- November 26—75 males
- December 10—87 females

PROGRESS OF CONSTRUCTION—PILGRIM STATE HOSPITAL

	Per cent complete
Caye Construction Co.—Farm colony construction	47.5
Jacobs Engineering Co.—Heating farm colony	42.
S. L. Snyder & Co.—Sanitary farm colony	36.
E. A. Kahn & Co.—Electric farm colony	54.
Lynn Construction Co.—Construction	99.

	Per cent complete
A. C. Horn Corp.—Waterproofing	38.
Duxin Standard Electric Fixtures	83.
The Simes Co.—Special electric fixtures	65.
Washbourne Refrigeration Co.	99.
Badaroeco—Electrical, reception group	99.
Landes Engineering Co.—Heating, reception group	99.
M. D. Lundin & Co.—Doors	99.
Arkay Co.—Kitchen equipment	99.

ROCHESTER

The construction program which has been under development for the past two years was entirely completed during the last six months of the year 1935.

Following the completion of the construction work, contracts were awarded for installation of screens and painting in part of the buildings, including homes for employees and patients' building. As soon as these contracts were completed patients were moved into the new building, beginning on September 11. The patients' building was completely occupied by patients already in the institution. The wards vacated in this manner were renovated and made ready for occupancy by patients received on transfer and the first transfer was received from the St. Lawrence State Hospital on October 8, consisting of 50 men patients. On October 15, 50 men and 50 women were received from Sonyea; on October 13, 100 women were received from Marcy State Hospital; on October 21, 50 women were admitted from Binghamton State Hospital. The patients' building has 12 wards and has a rated capacity of 618 patients.

Two homes for married employees were occupied at the same time as the patients' building, largely by employees who were already in the service. The vacated rooms then became available for use of an added personnel of 33 employees.

The assembly hall, which has a seating capacity of 1,015, was first put into service in November. This building has not been completely equipped, therefore, is not functioning to its full capacity. A few dances for patients and employees and moving picture shows have been held in this building.

The old administration building, which was vacated a year ago in October, was remodeled in accordance with plans submitted by the State Architect to provide added quarters for medical officers. This work was completed about July 1 and occupied in the middle of the summer by some of the staff members.

The heating system in one wing of the Monroe building was completely overhauled during the summer months. This heating arrangement is one of indirect type requiring installation of fans in the attic and a great deal of electric wiring.

In order to conserve surplus products of the farm and garden, canning equipment was installed at an expense of about \$1,600 and the steward estimates that the vegetables which have been canned have a value of approximately \$5,000.

Along with the new construction there has been considerable grading, road building, laying of sidewalks and development of parking space for the convenience of visitors to the hospital.

On November 4 a group of W. P. A. workers began work on a grading project which is a continuation of the work the hospital had been doing with the assistance of patients. The hospital was fortunate in that another project in the neighborhood required considerable excavation and the dirt from this was delivered to the hospital and was a great help in developing our grading. Owing to the lateness of the start of this project the work has been hampered more or less by weather conditions but, in spite of the inconvenience, considerable progress has been made.

Late in November a second W. P. A. project, consisting of interior painting in the Howard group, was begun and is continuing at the present time.

ROCKLAND

Since July 1, the contractors have made rapid and satisfactory progress on all of the new buildings under construction. The assembly hall, children's group of buildings, non-medical staff house and two of the employees' homes will be turned over to the State as soon as the electric light fixtures have been installed and a little additional interior painting has been completed. The eight-story infirmary building and one employees' home are 95 per cent completed.

Considerable progress was made during the late summer and fall in grading, top-soiling and seeding the grounds around several of the buildings.

Large quantities of evergreens, red oaks and maples have been planted in various parts of the grounds in accordance with the planting plans of the Division of Architecture.

In November two P. W. A. projects were approved for this hospital. One is a project for the completion of our grading for which Federal funds in the amount of \$39,176 were allowed, and the other is for clearing trees and underbrush from 60 acres of virgin land and converting same into tillable soil for which the government has allotted \$6,140.

Four bowling alleys, a new soda foundation, wall cases, show cases and other store fixtures have been installed in the basement of the new assembly hall which was planned for an employees' recreational center and the relocation of the hospital exchange store.

ST. LAWRENCE

The T. E. R. A. project for renewal of steam lines between Flower and Eastwood buildings was completed during the month of July, and the one covering repairs to storage bins and root cellars in August.

UTICA

A new Richardson and Boynton sectional heating boiler was installed at the Graycroft farm colony building.

From July 11 to December 5, the T. E. R. A. furnished us with two tinsmiths and four helpers, who assisted our own force in replacing some old roofs on the buildings and repairing others.

A new Amco portable sound-on-film projector was purchased at a cost of \$616, with monies furnished by the hospital exchange, for use on wards where there are patients who are unable to go to the assembly hall to see motion pictures.

A new X-ray apparatus, consisting of Westinghouse Monex generator with chronex timer, was installed in our physical therapy department at a cost of \$1,570.

Contracts were made for the erection of six new cottages for staff physicians and work on these buildings, begun in September, has progressed to approximately 60 per cent of completion.

WILLARD

	Per cent complete
Employee and staff accommodations and infirmary building:	
Electric fixtures for above buildings	100
Alterations to power plant and tunnels:	
Construction	100
Heating	100
Electric	100
Water softening apparatus	100
Cottages, nurses' home and infirmary building:	
Miscellaneous construction	100
Chapin House—fire escapes:	
Construction	100

	Per cent complete
Sewage disposal plant:	
Construction	32.4
Repairs to heating tunnel:	
Heating	100
Electric	2
The following W. P. A. projects have been approved:	
Roads and grading	\$47,759 00
(Work was started November 25.)	
Replacement of windows at Pines, Edgemere, Maples and Sunnycroft	2,980 00
Construction of a 12-car concrete garage	3,850 00

STATE SCHOOLS

LETCHWORTH VILLAGE

The 11 buildings under construction for the past two or three years are now finished and occupied.

Kirkbride Hall, one of the 11 new buildings, was officially opened on December 31, 1935, with a New Year's eve dance and supper for employees. Kirkbride Hall is the new assembly hall in the adult male group and is named for Hon. Franklin B. Kirkbride, who, until December, 1935, has been secretary of the Board of Visitors of Letchworth Village for 26 years. Much of what we now have at Letchworth is a result of Mr. Kirkbride's untiring efforts. Mr. Kirkbride is now president of the Board of Visitors.

Although the industrial building, another one of the new buildings, was not used for school purposes until the first of the year, the annual Christmas bazaar was held there on December 7.

Another of the new buildings, the mechanics home, which was originally intended for accommodations for mechanics, is being used instead by the research department and the women who teach in the industrial school. The research department uses the two lower floors for its offices, and the industrial teachers the top floor for their living quarters.

Three new stone buildings have been erected at the piggery. They are individual houses near the main building.

A smoke house for smoking hams and bacon has been constructed by our carpenters.

The house which we have been remodeling is now completed and occupied by one of our assistant engineers.

NEWARK

The purchase of approximately 40 acres of farm land from the Le Fevre estate has been made. This plot joins the Johnson farm, also recently purchased, on the southeast.

Construction of the new employees' building, south dormitory, hospital and infirmary building is 90 per cent completed.

The eight W. P. A. projects which were requested have all been approved. Garages have been built at the superintendent's and steward's residences.

The beauty parlor in the new infirmary has been enlarged, and more lavatories, electrical fixtures, booths, shelving, etc., have been installed.

ROME

We are now occupying our new male hospital building of 300 beds which has relieved overcrowding in our male department and given us opportunity for much better classification of our male population within the institution, separating the custodial department from the non-custodial, giving us better administration and classification of our idiot and paralytic cases in a building set aside especially for infirmary purposes.

We have provided for special school rooms at several of our junior colonies so that the school activities may be carried on outside of the house where the children live and make it more distinctly a school proposition, that is, the children going from their home to school and meeting groups from other homes at the school.

SYRACUSE

Water lines for fire protection have been installed at our Edwards, Belle Isle, Amos and Antrim farm colonies. One thousand feet of hose has been purchased in order that the colonies may have this added fire protection.

A seven-foot cyclone fence, 1,380 linear feet in length, has been constructed along the southern and western boundaries of the girls' playground.

Redecoration has been carried on in the second and third floors of the south wing, the chief engineer's residence, greenhouse and paint shop.

WASSAIC

Considerable grading has been done about the following buildings: superintendent's residence, girls' service building, administration building, the new school, buildings D and E, and the attendants' homes and infirmaries at the north end of the grounds.

Excavation has been started for the roads into the new hospital, and the earth removed is to be used in grading about the building.

Walks and roads about the new school building have been excavated and sub-base laid. The walks have been cindered for the present. Brick walks have been laid to the superintendent's residence, as well as a brick top to the wall surrounding the terrace. The terrace has been paved with flagstones.

As a start toward reclaiming some of the swamp land at the north end of our meadow, a group of boys was placed at work, during the summer months, just above the bridge at the entrance to the institution, and they have lowered the level of the stream there more than a foot. It is planned to continue this work next summer.

During the summer our boys excavated around the rocks in the field in which our temporary baseball diamond was located. The rocks were drilled and blasted, and the field cleared. The entire area was plowed up in the fall, transforming 15 acres of pasture into tillable land.

A new parking place has been constructed on the northeast side of building X-4, and a driveway has been built to this space. A parking place has been completed at the north end of the administration building. This has been cindered for the present. When time has been allowed for settling, a cement surface will be laid.

During the month of September the pasteurizing plant was placed in operation.

Evergreen trees were set out during October at the back of buildings A, B and C, to correspond with the planting in the boys' group. This will improve the appearance of the institution from the west side.

Several projects to be carried out by the W. P. A. have been approved, and a small group of men has been employed at this work. The following are the projects approved:

- Building parking place.
- Cleaning and repairing steam traps and valves.
- Tree surgery.
- Clerical work.
- Surfacing new road to superintendent's house.
- Blasting and removal of rock ledge.
- Construction of wagon shed.

The new superintendent's residence was occupied during the month of December.

CRAIG COLONY

The entire road about the Villa Flora group, for female patients, including service roads, and roads to several of the divisions occupied by male patients, were macadamized during the past summer. A large amount of much needed grading was accomplished in various sections. A W. P. A. allotment has been made available for additional work of a similar nature to be done as soon as weather conditions permit in 1936.

The new sewage disposal plant was placed in operation early in December. Under supplemental contract, Kishaqua creek is being dredged from the D. and M. Railroad bridge to the north line of the Colony property, so as to provide for a channel 70 feet wide.

Plans are being prepared for the erection of a new water supply system during the summer of 1936.

A considerable amount of equipment has arrived for the patients' cottages in Village Green group, to accommodate 200 males. The new combined kitchen and dining room and employees' building on the northeast corner of Villa Flora group will be available for occupancy when equipped early in 1936.

The new two-family staff house and a nurses' home, although completed, cannot be occupied until additional funds are available for equipment.

A large root cellar was built in the garden during the past summer.

Pryor cottage, damaged by fire in 1934, is now being rebuilt, and it is hoped will be ready for occupancy by 75 patients at an early date.

NOTEWORTHY OCCURRENCES

STATE HOSPITALS

BINGHAMTON

Miss Mary K. Knapp, acting assistant principal, and Mrs. Mary LaVelle, supervisor, returned August 10, after having completed a six weeks course at Teachers' College, Columbia University, New York, in various nursing subjects, in order to prepare themselves to better advantage in the instruction of our pupil nurses and affiliates from the Binghamton City Hospital and Wilson Memorial Hospital.

Eight pupil nurses were admitted for the first year of training and began their work September 10.

Graduation exercises took place in the assembly hall, October 9, seven female and one male nurse graduating in the R. N. group.

The Broom County Embalmers' Association met at the hospital laboratory July 15-16 for a demonstration of modern methods, the demonstration being furnished by the Undertakers Supply Co., of Chicago.

The annual field day was held August 14. There were 20 field events for patients and employees. The occupational therapy department had an attractive booth, displaying articles made by patients in that department.

Officers and employers contributed \$219.30 to aid the flood sufferers in this section. Fifty dollars was given to the Volunteers of America, \$50 to the Salvation Army and the balance, \$119.30, to the Red Cross.

Elmer Dikeman, chief engineer, retired on pension, July 12, 1935, and Thomas Crannell, charge day attendant, retired July 1, each having completed 25 years service in the hospital.

Nellie Law, laundry worker, retired on pension, November 12, on account of age.

Ross Hildreth, baker, died of heart disease, July 13.

Picnics during the summer were held at Pine Camp three days a week, the patients leaving at 9:30 a. m., returning at 4:00 p. m., taking their luncheon with them. Our female physical instructor accompanied the women patients and the male physical instructor accompanied the men patients at these picnics so as to direct their play activities.

A group of T. E. R. A. men were sent to this hospital from a camp near White Plains, N. Y., in July. Upon the request of Raymond A. Barrows, district director, the hospital lodged the men in the old teamsters cottage and provided a large tent to use as a dining room. The highest number in the unit was 72. During their stay in the hospital our mechanics erected

outdoor shower baths and ran some temporary wiring to light the wagon shed adjacent to the teamsters cottage. This unit moved to Smithville Flats, July 27, to work in the flooded sections in that vicinity.

P. W. A. funds in the amount of \$7,692 have been allocated to the hospital to engage unemployed men to work on the hospital premises. Among the various projects are rebuilding one and one-half miles of road, including ditches, culverts, etc., and cutting down two banks on two railroad crossing approaches at the farms.

The Department of Mental Hygiene, under date of November 29, informed us that the sum of \$15,372 had been allocated the hospital for the following P. W. A. projects: Painting inside buildings; repairing floors, ceilings and roofs; repairing and overhauling electric equipment, repairing and overhauling steam lines.

Christmas was celebrated at the hospital by distributing over 40 trees to the various wards, which were decorated by patients and employees. On the afternoon of December 24, the annual Christmas show was held in the assembly hall. A large tree was tastefully decorated and lighted with electric lights and the hall decorated with colored streamers. The first part of the program was put on by the patients and the second by employees who reproduced an old-fashioned Christmas party scene and also a take-off on Major Bowes' amateur hour. Two thousand and seventy-two packages were received by patients from relatives and friends.

The Christmas sale of articles manufactured by patients in the occupational therapy department was held December 4-6, at which \$330.50 was realized.

Mrs. Helen VanWhy, assisted by members of the American Legion Post and Auxiliary, held a Christmas party for ex-service patients on ward 40, Broadmoor. A large Christmas tree was provided, a musical entertainment was given, gifts were presented to the patients and luncheon served.

Four patients were boarded out in private homes during December, the hospital paying \$4 a week each for their board.

Miss Catherine Z. Franey, assistant social worker, was promoted to the position of social worker, October 1.

On November 15, John Sherslawsky, age 40, a patient in good physical health, lodged on ward 51, Broadmoor, admitted September 28, 1935, died. On examination it was found that his death was due to strangulation. The coroner was notified, and he and the superintendent notified the district attorney. Three attendants who were on night duty at the time were arrested and lodged in jail, but were subsequently able to give bail. All three employees have been discharged from the hospital. They were given a hear-

ing in magistrate's court on December 13, and were remanded to the Broome County jail. They were later brought before the grand jury and indicted. They will be brought for trial before the spring term of the county court.

BROOKLYN

September 24, Dr. William C. Garvin, superintendent of the Binghamton State Hospital, Dr. William J. Tiffany, superintendent of the Pilgrim State Hospital, Dr. George W. Mills, superintendent of the Creedmoor State Hospital, Dr. Charles L. Vaux, superintendent of the Newark State School, Dr. John R. Ross, superintendent of the Harlem Valley State Hospital, Dr. R. F. C. Kieb, superintendent of the Matteawan State Hospital, accompanied by Hon. William E. Haugaard, Commissioner of Architecture, visited the hospital.

A class in psychology from the City College of New York visited the hospital on December 2 and were given a talk by Dr. Morris D. Riemer, senior assistant physician, on "Administration of a State Institution." A class of pre-medical students from the Abraham Lincoln High School, Brooklyn, visited and inspected the hospital on November 30 and were given a talk by Dr. Riemer on "Major Avenues of Approach Toward Mental Illness."

During the Christmas season all the wards were attractively decorated, each being provided with a tree. Many of the patients were liberally remembered by their relatives. Those having no friends or relatives were each provided with a gift box purchased by the hospital from a fund for that purpose. Two entertainments were given, one on December 23 and one on December 27.

BUFFALO

Eight students were admitted to the training school for nurses, constituting the first junior class to be formed in three years.

On September 17, a meeting of the Western New York Occupational Therapy Association was held at the hospital.

At the regular meeting of the Board of Visitors in October, Mr. Edward G. Zeller was re-elected president, and Mrs. John R. Hazel was re-elected secretary.

After a service of 49 years, Thomas Sutcliffe, master mechanic, retired December 31, having reached the age of 70.

The following employees retired after completing 25 or more years of service, or having reached the age of retirement:

Nora Potter, John Hendry, Margaret McDonough, Florence M. Gray, Mary Powell, Amy Green, Alexander Samson, William Sutcliffe, Eva Kenyon.

CENTRAL ISLIP

Dr. R. G. Wearne, first assistant physician, has been designated by the Department of Mental Hygiene as acting medical inspector for the fiscal year, July 1, 1935 to June 30, 1936.

On July 25-27, Dr. I. P. Glauber, assistant physician, and Mrs. E. B. Bellsmith, social worker, attended the annual supervisors' conference of Smith College School for Social Work.

On August 25-September 2, the New York State Fair was held at Syracuse, N. Y. This hospital sent an exhibit of articles made in the occupational therapy department.

On August 27-31, the Suffolk County fair was held at Riverhead, N. Y. Articles were exhibited from the farm, as well as the occupational therapy department.

On October 15-18, the principal of the school of nursing, Mrs. D. D. McLaughlin, and 24 graduate and student nurses, attended the State Convention for Nurses held at Syracuse, N. Y.

On October 22-25, Mrs. E. B. Bellsmith, social worker, attended the New York State Conference on Social Work, which was held at Buffalo, N. Y.

On November 18, a course in ward management was commenced at this hospital. This is conducted by Miss Caroline E. Gray, R. N., of Teachers' College, Columbia University, New York City. About 100 employees are taking this course.

On November 19, the Long Island Psychiatric Society held its meeting at the hospital. A paper on "The Significance of Psychoses in Several Members of a Family" was presented by members of the Central Islip State Hospital staff.

On December 3, 4 and 5, the occupational therapy department conducted a Christmas sale in Robbins Hall.

Michael Ven Ditto was transferred from the Department of Public Works to the position of master mechanic at this hospital, October 1.

Miss Vera M. Smith, assistant social worker, resigned October 6.

The following employees died during the last six-month period:

Miss Sarah McDonough, attendant, August 1.

Mr. Patrick Farrell, attendant, August 17.

Mr. William F. Creighton, attendant, November 1.

CREEDMOOR

Patients' baseball team tied with Rockland for first place but were defeated two out of three in the play-off.

Special chicken dinners were served to patients on Thanksgiving and

Christmas. For the Christmas holidays, the wards were supplied with trees, wreaths, holly and other decorations. All friendless patients were given presents from a donated fund. On December 23, a special vaudeville entertainment was provided.

Two employees developed diphtheria in July and one patient the same disease in December. One employee also developed scarlet fever in November. All of these were cared for at the Queensborough Hospital for contagious diseases and all made a good recovery.

GOWANDA

The Western New York Hospital Council, composed of superintendents and representatives from various general and special hospitals in this section of the State, met on July 24, 1935, for a regular session and were entertained at this institution.

The Buffalo Neuropsychiatric Society met with us on October 26 and after a delightful supper, gave their attention to a series of papers by four members of the medical staff.

Members of the New York State Homeopathic Medical Society from Western New York assembled at this hospital, November 15 to meet their president, Dr. Walter E. Halfman.

The New York State Fish Hatcheries at Constantia, N. Y., furnished the hospital with 1,000 small perch for stocking the ice ponds.

The Federal Bureau of Fisheries from Cape Vincent, N. Y., sent us 400 black bass for the same purpose.

Mr. Henry T. Frank, storekeeper, who retired September 1, 1935, was given a luncheon in his honor at the hospital on September 6, when he was presented with a very beautiful Hamilton watch.

Mr. Sam Cocca, kitchen helper, died November 16, from pneumonia following appendectomy.

HARLEM VALLEY

Eleven students entered the training school of the Harlem Valley State Hospital this fall and of this number only nine remain.

The affiliate students, of which there are 12, are from St. Vincent's and Misericordia hospitals, New York City. This group entered October 1, 1935, for a three months course. On July 1, only four students from Misericordia entered for a three months course.

Mrs. Elizabeth Wainman, chief social worker, died December 28.

The following employees died during the past six-month period:

Mr. Benjamin Duncan, head carpenter, July 10.

Mr. A. J. Peterson, attendant, September 24.

HUDSON RIVER

Dr. John Y. Notkin, clinical director at this hospital, was promoted from assistant clinical professor, to assistant professor of clinical neurology and psychiatry, Columbia University, for the year ending June 30, 1936.

On July 30, a group of 20 students from the State College at Albany attended a clinical demonstration at this hospital given by Dr. Solon C. Wolff, parole officer.

A group of 30 students in psychology from the School for Adult Education in Yonkers, N. Y., visited the hospital, August 17 and were given a clinical demonstration of interesting psychiatric cases.

The hospital, as usual, exhibited at the Dutchess County fair held at Rhinebeck, August 27, 28, 29 and 30, articles made by the occupational therapy classes. Exhibition was also made of vegetables, fruit and flowers. On the recommendation of the judges, the hospital was presented with a special award of a cup.

The annual graduation exercises of the Hudson River State Hospital school of nursing were held in the assembly hall on the night of September 6. There were 12 graduates this year, and following the exercises a reception and dance was held. The address of the evening was given by Dr. H. N. McCracken, president of Vassar College.

Mrs. Gladys E. Russell, principal of the school of nursing, on October 18 attended the annual meeting of the New York State Nurses' Association at Syracuse.

Miss Margaret N. Jager, chief social worker, attended a meeting of the New York State Social Workers' Association at Buffalo from October 21 to 25.

Dr. Solon C. Wolff, senior assistant physician in charge of paroles, Mrs. Margaret J. Kohler, chief social worker, and Miss Mary A. Johnson of the social service department of this hospital, attended the conference of the Mental Hygiene Service at Yonkers, on November 1.

On November 2, a group from the department of sociology of the Albany High School, visited the hospital and was shown some of the new buildings and was given information regarding the general activities of the hospital.

Professor Joseph K. Folsom, professor of sociology, Vassar College, accompanied a class of 60 students to the hospital on November 4, who were given a clinical demonstration of the types of mental illness, by Dr. Kelleher. A similar clinical demonstration was also given on November 6 to a class of 50 students from the New Paltz Normal School.

On November 21, as many of our medical staff as could be spared, attended the meeting of the Dutchess County Psychiatric Society held at the Matteawan State Hospital.

A surgical motion picture entitled "Surgical Treatment of Peptic Ulcer," was shown to the medical staff and nurses of the hospital on December 18. A talk was given at this time by Dr. R. W. Andrews, consulting surgeon at this hospital, concerning the same subject.

Miss Frances T. Pearson was appointed assistant social worker and after-care agent, November 21.

Miss Annie K. Gillies, assistant social worker, resigned November 30.

KINGS PARK

Arrangements have been made with certain general hospitals to give a course of instruction to affiliating students from the general hospitals at the Kings Park State Hospital.

The school of nursing resumed its class work September 4, 1935, with a student body of 15 women and 10 men.

The graduation exercises of the school of nursing were held at York Hall, September 26, 1935. Those who graduated were: Gladys L. Brown, Aline Holland, Norma Adeline O'Dell and Bonnie Belle Thigpen.

The Long Island Psychiatric Society held a meeting on October 22, 1935, at York Hall. Address: "Psychology of Schizophrenia," by Dr. Paul Schilder, New York City, and election of officers for the ensuing year.

At the annual meeting of the Board of Visitors, held in October, Mr. Matthew J. Tobin and Rev. John C. York were unanimously re-elected president and secretary, respectively.

Mrs. Inez Hartmann, occupational therapist, died September 29.

Mrs. Arlene Wolberg, assistant social worker, resigned October 15.

The following employees retired from the service of the hospital during the past six months period:

Thomas McWilliams, Sr., special attended, laundry, August 1.

F. Frank Crawford, farm supervisor, August 1.

James Sweeney, night charge attendant, September 1.

The following employee died:

Mrs. Flora Hitchcock, attendant, October 1.

MANHATTAN

The special committee appointed by the Commissioner of Mental Hygiene to study the best way to put into effect a shorter day for institutional employees visited the hospital on July 24 and conferred with the superintendent.

ent and acting steward. An increase of 38½ per cent of employees was requested to put the eight-hour day into effect.

A meeting of the Ward's Island Psychiatric Society was held on October 7, at which the following program was presented:

Röntgenographic Survey of Intracranial Lesions (lantern slide demonstration)—Dr. J. Townsend Travers

Discussion: Dr. Cornelius Dyke

A Preliminary Study of the Clinical Course and Prognosis of 450 Cases of Traumatic Psychoses—Drs. Eugene Davidoff and Paul Hoch

Discussion: Drs. George W. Henry, Foster Kennedy and Paul Schilder

The graduation exercises of the school of nursing were held on the evening of October 10. Thirteen women and two men were graduated. The address was delivered by Dr. Robert Woodman, superintendent of the Middletown State Homeopathic Hospital. Prizes to students were given by the Board of Visitors. A dance and refreshments followed.

Several members of the staff attended the December meeting of the Ward's Island Psychiatric Society at the Brooklyn State Hospital. Inasmuch as the staffs of the Brooklyn State Hospital and the Rockland State Hospital had joined the society its name was changed to the Psychiatric Society of the Metropolitan State Hospitals.

The first meeting of the Ward's Island Psychiatric Society was held on Ward's Island on December 11, 1908, although it was not until February 15, 1909, that its name was formally adopted by the society. It was composed of the medical staffs of the Manhattan State Hospital and the State Pathological Institute, both situated on Ward's Island. The Institute in its present location in the Columbia Medical Center on West 168th Street, is known as the Psychiatric Institute and Hospital. Dr. George H. Kirby, later director of the Institute, presided as chairman at the first meeting. The first president of the society was Dr. William Mabon, then superintendent of the Manhattan State Hospital; Dr. David K. Henderson of the Institute, was the first secretary.

Among the physicians who composed the first membership list were also such well-known members of the staff of Manhattan State Hospital as Drs. C. Floyd Haviland, Philip Smith and Samuel W. Hamilton; also Drs. Charles B. Dunlap, C. Macfie Campbell, Adolf Meyer and Charles I. Lambert, of the staff of the Institute. Some of the former presidents include the following physicians, either of the hospital or of the Institute: William Mabon, C. Floyd Haviland, C. Macfie Campbell, August Hoch, William C.

Garvin, Philip Smith, William W. Wright, Ralph P. Folsom, Mortimer W. Raynor, Clarence O. Cheney, and Isaac J. Furman.

Other well-known psychiatrists who were either members or particularly interested in the society were Drs. A. A. Brill, L. Pierce Clark, Foster Kennedy and Frankwood E. Williams.

Mr. John M. Reardon was promoted from assistant steward to steward on December 19, to fill the vacancy caused by the death of Mr. Michael F. Bradley.

The usual Christmas festivities were held. The American Red Cross sent bags filled with candy, tobacco and useful articles for the ex-service men. An entertainment by 20 children from the Personality School was given to the patients on the evening of December 26.

The following employees died during the past six-month period:

Kathleen E. Reardon, attendant (detailed), August 28.

Charles L. McCarthy, plumber and steamfitter's helper, November 10.

MARCY

On July 11, Dr. Robert Woodman, chairman, and Dr. John R. Ross, committee appointed to investigate the advisability of an eight-hour day in State institutions, visited the hospital.

During the summer a series of softball games was played by patients' teams representing the Rome State School, Utica State Hospital and the Marcy State Hospital. The patients' team of this hospital won the championship for the second successive year and on September 24 they were given a chicken supper in honor of this.

On October 8, the Oneida County Medical Society held their monthly meeting at this hospital.

On October 29, a meeting of the visiting and consulting staffs and also the resident staff was held at this hospital. A dinner was served and following this, members of the resident staff presented typical cases of the various forms of psychoses.

On November 13, 100 female patients were transferred from this hospital to the Rochester State Hospital.

On November 19 and 26 and on December 3, clinics were given at this hospital to Colgate University students by Dr. Neil D. Black, acting clinical director.

On December 2, 3, 4 and 5, the annual occupational therapy bazaar and sale was held in the assembly hall. Approximately \$800 was realized.

On December 23, the annual Christmas party for the patients was held in the assembly hall. An entertainment was given by the pupils of the Modern Dance Studio of Utica.

The ex-service patients have on several occasions been entertained at dinner by the various Legion posts in the surrounding districts. Mrs. Tom Johnson of Utica, has been instrumental in securing these invitations.

Mr. Walter E. Tyler, pharmacist, retired July 31.

Miss Vera M. Smith was appointed social worker, October 7.

Miss Edna Conway was appointed principal of the school of nursing, November 1.

Mr. Raymond Culver, attendant, died August 1.

MIDDLETOWN

The nineteenth annual field day and festival was held Wednesday, July 31, and consisted of: Part 1. Exhibition program by the patients, arranged under the direction of Ray E. Bennett, physical director. Part 2. Competitive field events participated in by both employees and patients. After the events a picnic lunch was served to the patients. Official visitors included Mrs. Eleanor C. Slagle, director of the bureau of occupational therapy, and James E. Simpson, supervisor of physical training.

The training school opened on September 4 with 4 men and 12 women accepted for the junior class.

The annual masquerade dance for patients and employees was held on the evening of October 31 in the amusement hall. Prizes were awarded to the handsomest and most grotesque costumes of both employees and patients.

The hospital is again represented by a local newspaper under the editorship of Dr. Max Zuger. It is issued monthly and will serve as a record of all activities connected with the hospital.

The hospital's Christmas program included parties and the distribution of candy, nuts and fruit to working patients. Christmas packages were distributed on the wards.

The boarding out of patients has been gradually extended and as of December 31, 6 men and 38 women, making a total of 44 patients, were boarding in different communities of the hospital district.

Mrs. Henry Bacon, Mrs. W. W. Davis and Mrs. Edmund L. Tichenor, visitors representing the State Charities Aid Association, paid their annual visit to the hospital, September 19.

The following employees retired during the past six-month period:

Mr. John F. Murray, gardener, after more than 25 years of service, on August 31.

Mrs. Nellie Federico, supervisor of the east group department; Miss Margaret Tracy, charge nurse, and Mrs. Mary DeKay, cook in the residence of the first assistant physician—all as of October 31.

PILGRIM

On July 11, Kings Park State Hospital donated 572 books from their library for the patient's library at this hospital.

The Japanese Association of New York, Inc., visited the hospital on December 15, at which time they entertained the Japanese patients and brought Christmas gifts for each.

ROCHESTER

On September 4, the hospital was visited by Governor and Mrs. Lehman and the Governor's secretary. The party was accompanied to the hospital by Mr. Dailey, Mr. Finucane and Mrs. Werner, members of the hospital Board of Visitors. The Governor spent about two and a half hours at the hospital and inspected several parts of the new construction. The patients' building was then being made ready for occupancy.

On September 24, the New York State Nurses' Association, District No. 2, met at the hospital. The attendance was about 140. The group was addressed by members of the staff and after their business meeting was finished a buffet luncheon was served. Many of the visiting nurses made inspections of parts of the institution.

On November 14, Dr. George F. Inch, superintendent of Ypsilanti State Hospital, Michigan, and his steward, Mr. J. E. Burnett, visited the hospital. Dr. Inch was particularly interested in the new construction for the reason that he is about to develop some new institutional features and was desirous of getting such information as he could from our new developments.

ROCKLAND

On July 4, the patients' track team from this hospital participated in the track meet at the Harlem Valley State Hospital and for the third consecutive year won the track meet, thus entitling our team to keep the trophy which was given by a member of the Board of Visitors of the Harlem Valley State Hospital.

Our annual field day was held on July 10 with the usual field events in the morning and a baseball game in the afternoon. Approximately 2,200 patients attended the exercises.

On July 19, District No. 11 of the New York State Nurses' Association held its quarterly meeting at this hospital with over 100 members and guests present.

Fifteen male and 16 female students enrolled in the junior class of the school of nursing, September 4.

Dr. Winfred Overholser, Commissioner of the Department of Mental Diseases of Massachusetts, visited the hospital, September 13, and inspected the buildings of the children's group now under construction.

Miss Elizabeth Staley, chief occupational therapist, attended the annual convention of the American Occupational Therapists' Association held at St. Louis, September 30-October 3.

On September 30, Dr. Arthur P. Noyes, superintendent of the Rhode Island State Hospital, Providence, R. I., and several architects visited the hospital to study the various types of buildings, preparatory to planning new construction in Rhode Island.

Miss Frances W. Witte, principal of the school of nursing, attended the annual meeting of the New York State Nurses' Association held in Syracuse, October 14-18.

Dr. Cameron E. Carpenter was appointed dental interne, July 1.

Miss L. Enid Brown was appointed assistant social worker, October 1.

Drs. Leo P. O'Donnell and Frank F. Tallman attended an institute on the care of mental defectives held in the Woods School, Langhorne, Penna., October 15.

Dr. Joseph Lander, assistant physician, returned to the hospital, September 26, after a three-months trip to Europe.

Dr. Charlotte Munn attended a 10-weeks course in neuropsychiatry given at the New York State Psychiatric Institute and Hospital.

The first class of students in the school of nursing was graduated October 22. The class consisted of seven female and five male students and the exercises were held in the new assembly hall which, although not completed, was used with the permission of the contractors and the Department of Public Works.

Dr. William R. Strutton, pathologist, visited the State Institution for the Study of Malignant Diseases, November 11-16.

Mr. Frank Karpeles resigned from the position of chief supervisor, November 16.

Mr. Willard Amell was appointed chief supervisor, December 1.

Notice has been received that \$3,227,000 have been allocated from the relief bond issue for new construction at this hospital. It is proposed to construct two buildings for disturbed patients, each to accommodate 600 patients, a home for employees, two single staff cottages, finish the third floor of building 9, enlarge the power plant and make provisions for an increased water supply and sewage disposal.

The following delegates from the state of Missouri visited the hospital on December 4: Mr. L. R. Bowen, chief architect; Dr. F. W. Grogan, superintendent of city sanitation in St. Louis, and Dr. E. F. Hoctor, superintendent of the state hospital at Farmington.

Dr. J. S. Wilson, superintendent of the Federal penitentiary at Lewisburg, Penna., visited the hospital, December 6.

On November 20, a letter was received from Mr. Harlan H. Horner, assistant commissioner for higher education of the State of New York, advising us that the Rockland State Hospital training school for nurses had been unconditionally registered as of September 7, 1932.

ST. LAWRENCE

On July 25, the Honorable Meyer Alterman, chairman, Ways and Means Committee of the State Assembly, and the Honorable W. Allan Newell, member of the committee, visited the hospital in reference to budget matters.

Miss Alice L. Edwards was appointed occupational therapist, December 16.

UTICA

The editorial and business offices of the *PSYCHIATRIC QUARTERLY* were moved to Utica, from Albany, as of July 1, 1935. Dr. Richard H. Hutchings succeeds Dr. Horatio M. Pollock as editor, and Dr. Clarence O. Cheney is now associate editor.

On July 2, a garden party was given by Mrs. Griffith Jones at her home in Whitesboro for the patients of her weekly dancing class, and for those who took part in field day exercises. Games were played and refreshments served.

The annual conference of supervisors of Smith College School for Social Work was held in Northampton, Mass., on July 25-27, and was attended by Dr. Newton J. T. Bigelow, acting clinical director, and Miss Eva M. Schied, head social worker and supervisor of field work at this hospital.

Six articles made in the occupational therapy department were sent for exhibition at the New York State Fair at Syracuse during the week of August 26. Mrs. Ruth B. Nelson, chief occupational therapist, was on duty at the fair the entire week.

Miss Catherine Charles, social worker, completed the six-weeks course at the New York School for Social Work, on August 31.

Nineteen affiliating student nurses, representing the Faxon and Memorial hospitals in Utica, and the Memorial and University hospitals in Syracuse, on September 9 began their three-months course in psychiatric nursing at

this hospital and returned to their respective hospitals on December 8. On the latter date, other similar groups reported here.

On the evening of September 10, joint graduation exercises were held at the John F. Hughes School by the Faxton, Memorial and Utica State hospital schools of nursing. Eight students from the Utica State Hospital school received their diplomas.

Mrs. Mabel Kirkpatrick, social worker, was granted a leave of absence beginning September 16, in order that she might complete her education and receive a degree from the Smith College School for Social Work.

Miss Mary E. Cole, assistant principal of the school of nursing, resigned on September 30. She was married to Roscoe C. Griffith, bookkeeper-paymaster at this hospital.

The boarding out plan for patients was inaugurated during the month of October, when five patients were placed.

On October 17, a group of social welfare workers from the children's court, T. E. R. A., Montgomery County Home, the relief bureau and the veterans' bureau, all of Amsterdam, spent the day at the hospital. They visited the departments of the hospital and afterwards assembled for a round table discussion of problems concerning their work, which seemed to them to have psychiatric implications. There were 20 individuals in this group. On October 31, a similar group from Amsterdam, comprising the remainder of the workers in these departments, visited the hospital and the program was repeated for their benefit. Dr. N. J. T. Bigelow, director of clinical psychiatry, had charge of these meetings and was assisted by Miss Eva M. Schied, head social worker.

Miss Lena A. Kranz, principal of the school of nursing, and as many graduate nurses as could arrange to be absent from duty, attended the annual meeting of the New York State Nurses' Association held in Syracuse, October 15-17.

Miss Eva M. Schied, head social worker, and three members of the social service department attended the State Conference of Social Work at Buffalo, N. Y., on October 22-23.

Professor C. E. Meyer of the North High School, Syracuse, and 56 students visited the hospital on November 7. Following a visit to the various departments, they were addressed by Dr. R. D. Helmer, first assistant physician, on the subject of abnormal psychology and were given a clinical demonstration.

The annual exhibition and sale of articles made in the occupational therapy department were held on December 4-5.

A mental hygiene clinic was inaugurated at Saratoga Springs on December 13, by Dr. Cyril J. C. Kennedy, who will conduct the clinics there in the future which are to be held on the second Friday of each month.

On December 13, Professor G. Nordberg of Hartwick College, Hartwick, N. Y., brought 10 students from the advanced psychology class to the hospital. After visiting various departments of the hospital, they were addressed by Dr. O. J. McKendree, on the subject of organic psychoses.

On December 14, Professor G. A. Morgan and 50 students of the psychology class at Hamilton College, Clinton, N. Y., visited the hospital. A clinic was conducted by Dr. Newton J. T. Bigelow.

Under the direction of Mrs. Tom Johnson, the Christmas party for ex-service men was held on December 23. Gifts, which had been given by various posts and auxiliaries in this locality, were distributed to each of the men present and refreshments were served.

The Christmas party for patients was held in the assembly hall on December 24. The hall was appropriately decorated, gifts were distributed to each patient present and refreshments were served.

WILLARD

On July 8, 1935, the severe inundation which effected the entire Finger Lakes section of New York State caused considerable damage to the Willard State Hospital. For three days prior to that day there had been heavy rains and brooks were swollen. On the night of July 7 and until 10 a. m. on the 8th, the rainfall assumed cloudburst proportions. Small creeks which coursed through the hospital grounds became raging torrents, uprooting trees, tearing out bridges and carrying great boulders down toward the lake. By 4 a. m. on the 8th three of the bridges supplying the south side of the grounds had been washed away. This left us with but one means of transportation, a road over a deep gully which had been built on a fill, the fill being supported by a large stone and concrete culvert.

At daylight the water of Lake Seneca was found to be so muddy and there was so much debris and organic matter floating about, it was thought advisable to discontinue pumping and use the water in the reservoir. Notices were immediately sent out that all water should be boiled and four days later when pumping was resumed it was necessary to treat heavily with chlorine. As a result of these precautions, no cases of gastro-intestinal illness occurred among our patients or employees.

Early on the morning of the 8th, surface water coming down from the vineyard hill formed into small rivulets and flooded the basement of Edge-

mere, a building housing 350 female patients. Transformers were burned out and the building was without electric lights. Trenches were dug to divert the water about the building and it became necessary to remove a portion of the basement wall of the building in order to allow the water to drain out.

At 11 a. m. on the 8th a cloudburst occurred which caused a tremendous rise in the water of Simpson Creek. This carried down portions of bridges, trees and other debris and clogged the opening to the culvert under the fill on which our only road remained. In a very short time the water in this gully rose about $23\frac{1}{2}$ feet. A portion of the culvert was undermined and the fill was gradually washed out.

Through this fill a newly-constructed steam tunnel had been built and only shortly put in operation. By noon this tunnel was exposed and at 5 o'clock, its foundation having been washed out, four sections, or 120 feet, fell, carrying with it the steam pipes and electric service lines. The collapse of the steam tunnel and the electric service conduit cut off steam and power to the south side of the grounds so that the Pines and Edgemere buildings housing 650 patients, the cold storage, laundry and the nurses' home were without steam and electric current.

Temporary electric cables were obtained and within 48 hours electric current was again supplied to the cold storage and laundry and none of the supplies in the cold storage were damaged. Within 72 hours a temporary six-inch steam line, 494 feet, was installed and the laundry was again in operation.

Through the courtesy and cooperation of Dr. Charles L. Vaux, superintendent of Newark State School, our laundry was cared for and aided greatly in keeping our patients comfortable.

During the night of the 8th while the water was still rising in Simpson Creek, considerable alarm was felt for the patients at Pines and Edgemere. Some of the infirm patients were immediately removed to Chapin House. The others were dressed and prepared to move on a moment's notice. On Tuesday morning it was decided best to evacuate these buildings and all of the patients were moved into the new infirmary building, where they have remained while repairs to the damages have been under way.

This flood did much damage to the roads and grounds of the hospital. At some points great ditches were formed through the grounds. Roads in certain places were completely washed out. Much top soil was washed into the lake. A considerable amount of recent grading was destroyed. Beautiful trees were undermined and fell. Some trees had the bark stripped from their trunks as debris rushing down on the rivulets struck them with such force.

Immediately preliminary work of cleaning out the culvert and stream bed was started. This necessitated a considerable amount of dynamiting in order to break up the concrete which had plugged the culvert. The permanent repairs to the existing culvert and the extension of the same was started August 13 under the management of the State Department of Public Works. During the month of October the culvert had been replaced. Wing walls, aprons and a concrete floor had been constructed through the entire culvert. From a hill nearby fill was obtained and the culvert covered. Piles were driven and a new steam tunnel of five sections, each 30 feet long, was built on these and completed by the end of November. During December a contract was let and the steam pipes were replaced and the temporary lines removed. The stream bed to the east of the culvert has been straightened and widened. All logs, fallen trees and other material that might again cause damage have been removed. It is expected that the new electric cables will be put in place in the near future.

The hospital management is indeed grateful for the assistance and co-operation of the State Department of Public Works.

During an electrical storm which occurred on Sunday, July 21, the smoke stack at the Pines power house was struck by lightning and considerably damaged.

Mr. D. M. Collier of the division of architecture, was at the hospital, July 24, relative to elevators at the infirmary building.

Mr. T. F. Farrell, chief engineer, Department of Public Works, came to the hospital, August 5, to examine flood damage to the tunnel and culvert.

Edward Smith, engineer of the Department of Public Works, took charge of the reconstruction of the culvert on August 13.

Mr. Guy W. Pinck, district engineer, Department of Public Works, accompanied by Mr. F. B. Crocker, associate engineer, were at the hospital, August 14, relative to the construction of the culvert and other work necessitated by flood damage.

Mr. Andrew J. Delaney, steward, St. Lawrence State Hospital, visited the hospital, August 22-23.

Mr. E. D. Camp, associate architect, division of architecture, called at the hospital, September 26 and 27, in regard to dining room alterations.

Dr. Barker of the Department of Architecture, Albany, visited the hospital, October 7-8 relative to landscaping.

The annual meeting of the Seneca County Medical Society was held at the hospital, October 10.

Through the courtesy of the Winthrop Chemical Company, Inc., 170 Varick Street, New York City, a motion picture, "Modern Methods of

Anesthesia," was shown to the medical and nursing staff on October 11. "Novocain Anesthesia in Obstetrics" was shown on October 21.

The annual meeting of the Willard Committee on Mental Hygiene and After-Care was held at the hospital, October 23. Dr. Charles L. Vaux, superintendent, Newark State School, spoke at the afternoon session on "Family Care."

The ex-service patients were visited November 10 by the Ladies' Auxiliary of the Kirk-Casey Post, Seneca Falls.

Mr. H. E. Cowles, engineer, Department of Public Works, was at the hospital, November 18, to consult with the superintendent relative to projects that have been allowed by the W. P. A.

Dr. John M. Swan of Rochester, addressed the physicians, nurses and student nurses at this hospital on November 25, on "Cancer, Its Cause, Prevention and Control."

Mrs. Susie E. Stockdale, night attendant, died September 30, 1935.

PSYCHIATRIC INSTITUTE AND HOSPITAL

A graduate Course in Neurology and Psychiatry as an extension course of Columbia University, was given at the Psychiatric Institute and the Neurological Institute from September 30 to December 6, 1935.

A Quarterly Conference was held at the Institute on December 21, 1935.

SYRACUSE PSYCHOPATHIC HOSPITAL

Entertained the Neuron Club at dinner on the evening of November 2, 1935. Dr. G. Fred Hiss reported on his trip to Russia last summer.

Western New York Occupational Therapy group held their regular meeting at the hospital on November 19, 1935.

STATE INSTITUTIONS

LETCHWORTH VILLAGE

A surprise party to celebrate Dr. Little's twenty-fifth anniversary as superintendent of Letchworth Village was given to him here on July 1, 1935, by a large group of his friends and admirers. Friends from all over the State and nation remembered him on the occasion and extended their felicitations with messages and personal visits. Judge Mortimer B. Patterson, the president of the Board of Visitors at that time, presented Dr. Little with a silver cocktail shaker, as a token of affection and admiration, from him and his colleagues on the board, and the employes of the institution presented him with a wrist watch. The party was held in Franklin Hall,

where a luncheon was served. Among the speakers were Hon. Franklin B. Kirkbride, the real sponsor of the affair, and, at that time, secretary of the Board of Visitors, and Dr. Frederick W. Parsons, Commissioner of the Department of Mental Hygiene.

The six weeks summer course which we offered to third and fourth year medical students was a success. There was a large attendance and the students expressed the opinion that the course was most beneficial. The medical staff cooperated in a comprehensive program of lectures and demonstrations. Mr. Franklin B. Kirkbride, secretary of the Board of Visitors, addressed the school on "The Economics of Mental Deficiency." This summer course serves as a contribution to the education of various professional groups in the State's mental hygiene activities.

The eighth annual conference of the Social Workers of the New York and New England State Schools was held here on October 7 and 8. The guest speaker at this conference was Dr. Edgar A. Doll, clinical director of the Training School, Vineland, N. J. His topic was the "Social Maturity Scale," which is a new test devised by Dr. Doll and some of his associates. This was of interest to the group because portions of the test may be administered by social workers.

Letchworth Village won the silver cup offered by the Department of Agriculture and Markets for the grand prize in pig production. Thirty-two sows farrowed an average each of 12 pigs with an average of 10 pigs raised.

Letchworth Village also won a certificate, issued by the Department of Agriculture and Markets, for fourth place in the production of eggs. The flock average 190 eggs per hen or an average production of 52.1 per cent.

On account of being elected a justice of the Supreme Court, Hon. Mortimer B. Patterson was obliged to resign as president and member of our Board of Visitors. A testimonial luncheon was given to him by the Board of Visitors on December 26, 1935, at the superintendent's residence in recognition of his service as president. Mr. Kirkbride, the former secretary, is now president, and Miss Mary E. Davidson, the secretary.

Appointments:

Dr. Edward J. Humphreys, director of research, member of the New York City Committee for the Study of the Needs of the Feeble-minded.

Dr. Elaine F. Kinder, research psychologist, member of the International Committee on Standardization of Psychological Tests, of the International Federation of Eugenic Organizations.

NEWARK

Twenty thousand dollars became available for boarding homes on July 1, 1935, and new placements were rapidly made, increasing the number to 90.

The Construction Committee of the Department of Mental Hygiene, the State Architect and his assistants, visited this school on October 14 to inspect the new buildings under construction.

Seventeen graduate nurses had the opportunity of spending one day at the New York State Nurses' Association held in Syracuse on October 15 to 17.

Dr. Walter J. Craig, director of the orthopedic division of the State Department of Health, visited this school on October 26, and observed the class in spastic paralysis.

All scholastic teachers, and some of the personnel of the occupational therapy department, attended the Teachers' Conference held in Rochester, N. Y., on November 1.

Miss Lucille Wentworth of New Haven, Conn., reported for duty on November 19, as assistant in the physical therapy department. Miss Wentworth is a graduate of Arnold College for Hygiene and Physical Education, and has also had a course in physical therapy at Yale University of Medicine.

Fire occurred in building "C," which is one of the main buildings of the institution, on November 29. Damage was confined to the rear staircase, and the patients were all escorted safely from the building. The cause of the fire is undetermined.

Miss E. Joanna Coolidge, dietitian, visited St. Luke's Hospital, New York City, in December, to consult with their chief dietitian and to note any advances in the course of training.

A descriptive record card was prepared by Dr. Jacob Sirkin, medical interne, and is now in use in the spastic class. Dr. Sirkin also devised a crutch support allowing movement on casters which is quite satisfactory for the purpose.

At 7:15 p. m., November 29, a fire started in the first floor of the rear staircase of building C and reached the third floor, most of the damage being confined to this stairway.

Smoke was noticed by an attendant, and the matron, Mrs. Button, who pulled the fire alarm; the village fire department promptly responded. Meanwhile, the employees on duty marched their patients out the rear door and across the second floor fire escape and, with the help of the arriving male employees, carried and wheeled the patients from their beds. Ac-

according to a standing order, all patients were taken to the laundry building, from where they were distributed to various cottages and placed in bed. All patients were accounted for and none suffered any accident or injury.

The damage was in the stairwell and the doorways leading from it. All door and window casings were burned out, leaving a thick deposit of black on all walls, ceilings and windows, with considerable charring near the staircase. The operation of the automatic sprinkler at the attic level checked the fire in that direction.

The estimated damage was \$10,000. Investigation, so far, has failed to reveal the cause of the fire.

SYRACUSE

The girls' camp on Lake Ontario, which was under the direction of Miss Evelyn Ditton, closed late in August, after a most successful season. The boys' camp also was closed about the same time. A softball league, organized at the school and at our colony department, terminated in September, following championship playoffs. The cup was won by the Amos colony boys.

Over 1,000 children attended the State Fair, the last week in August.

The twelfth summer session of this school was held from July 8 to August 16, in affiliation with Syracuse University. Eighteen students were enrolled in the various classes.

On October 8 a fire occurred in the paint shop, but was promptly extinguished by the Syracuse fire department before any great damage was done. Investigation indicated that oily cloths may have come in contact with a heated pipe.

Christmas plays were given at the main school and at the colony department. The play at the main school was entitled "The Nativity." About 500 children attended a special Christmas entertainment at Loew's Theater, on December 26, the entertainment having been given by the Syracuse Elks.

Mr. Charles Kelly, charge attendant, died December 12.

CRAIG COLONY

Dr. Kralich, a member of the medical staff of the Wahjamega Michigan Colony for epileptics, spent two weeks at the colony in July, to study methods.

Students from the summer school of the Geneseo State Normal School visited the Colony, July 23, at which time a clinic was presented by Dr. G. J. Doolittle.

The colony's troop of Boy Scouts camped in the "big woods" over the Labor day weekend.

On September 6, Dr. Wm. T. Shanahan addressed the Nunda Rotary Club on the care of epileptics under the Colony plan.

On September 14, Dr. V. I. Bonafede, assistant physician, returned to duty after nine months sick leave.

On September 19, during a heavy thunder storm, lightning struck the steeple of the new Protestant chapel, but fortunately no fire ensued.

On September 28, 63 members of the colony's Girl Scouts were taken to Perry for an outing.

Dr. F. K. Anderson, assistant physician, took the 10 weeks postgraduate course at the Psychiatric Institute beginning October 1.

The graduating exercises of the colony's training school for nurses took place on October 8, eight members being graduated. Dr. R. A. Page of Geneseo, gave the address on that evening.

On the evening of October 23, the colony's baseball league had a supper, the speaker for the occasion being Kenneth O'Dea, a member of the pennant-winning Chicago team.

The Second District Nurses' Association held a regular meeting at the colony on October 29, a clinic being presented by Dr. G. J. Doolittle.

Dr. Wm. G. Lennox and Dr. and Mrs. Frederick Gibbs of Boston, Mass., spent several days at the colony making special observations regarding alteration of electric currents through the brain in relation to seizures.

During the fall, a series of clinics were presented to the Geneseo State Normal School students by Dr. G. J. Doolittle.

On October 13, Alton D. Howell, for many years an employee of the colony, died as result of injuries sustained while acting as deputy sheriff and endeavoring to control automobile traffic in the vicinity of the colony.

CHANGES IN PERSONNEL IN THE MEDICAL SERVICE

Abbate, Dr. Stephen H., assistant physician at the Middletown State Homeopathic Hospital, was promoted to senior assistant physician on September 1, 1935.

Adelman, Dr. Sarah, was reinstated as senior assistant physician at the Brooklyn State Hospital, September 10, 1935, and resigned September 30, 1935.

Alderman, Dr. Jerome, was appointed psychiatric interne at the Psychiatric Institute and Hospital, August 1, 1935.

- Baer, Dr. Victor, assistant physician at the Hudson River State Hospital, was promoted to senior assistant physician on September 1, 1935.
- Barasch, Dr. Julius, assistant physician at the Harlem Valley State Hospital, was promoted to senior assistant physician on September 1, 1935.
- Bevans, Dr. Margaret, was appointed medical interne at the Kings Park State Hospital, July 1, 1935, and resigned December 31, 1935.
- Bigelow, Dr. Newton J. T., senior assistant physician at the Utica State Hospital, was designated acting clinical director on July 1, 1935.
- Bohn, Dr. Ralph W., senior assistant physician at the Gowanda State Homeopathic Hospital, was promoted to the position of director of clinical psychiatry, July 16, 1935.
- Brennan, Dr. Edward, was appointed medical interne at the Kings Park State Hospital on November 1, 1935.
- Brown, Dr. A. Wilson, medical interne at the Central Islip State Hospital, resigned July 31, 1935.
- Brown, Dr. James E., assistant physician at the St. Lawrence State Hospital, was promoted to senior assistant physician on August 14, 1935.
- Brussel, Dr. James A., assistant physician at the Pilgrim State Hospital, was promoted to senior assistant physician on August 23, 1935.
- Bryan, Dr. L. L., medical interne at the Rome State School, was transferred to a similar position at the Marcy State Hospital, November 1, 1935.
- Carson, Dr. William R., assistant physician at the St. Lawrence State Hospital, was promoted to senior assistant physician on August 14, 1935.
- Catalano, Dr. Joseph J., assistant physician at the Kings Park State Hospital, was promoted to senior assistant physician on August 15, 1935.
- Clark, Dr. Preston R., was appointed medical interne at the Utica State Hospital on July 18, 1935, and resigned, due to the death of his father, Dr. A. P. Clark, on August 31, 1935.
- Clinco, Dr. Arthur, psychiatric interne at the Psychiatric Institute and Hospital, resigned August 1, 1935.
- Cumming, Dr. Robert, assistant physician at the Hudson River State Hospital, resigned on October 31, 1935.
- Dawson, Dr. Harold S., medical interne at the St. Lawrence State Hospital, resigned August 31, 1935.
- Depner, Dr. Rudolph J., formerly assistant superintendent of the Exeter School, LaFayette, R. I., was appointed medical interne at the Wassau State School, August 1, 1935.

- Dodds, Dr. Harold H., assistant physician at the Rockland State Hospital, was promoted to senior assistant physician, September 1, 1935, and was transferred to Marcy State Hospital, September 30, 1935.
- Downes, Dr. Ralph L., was appointed medical interne at the Binghamton State Hospital, July 1, 1935.
- Durney, Dr. Daniel P., was appointed medical interne at the Brooklyn State Hospital, November 18, 1935.
- Edelstein, Dr. John E., assistant physician at the Harlem Valley State Hospital, resigned December 22, 1935, to accept a similar position at the Pilgrim State Hospital.
- Elliott, Dr. Helen E., was appointed medical interne at the Binghamton State Hospital, July 1, 1935.
- Feinstein, Dr. Samuel, was appointed medical interne at the St. Lawrence State Hospital, September 24, 1935.
- Feldman, Dr. Harold, was appointed medical interne at the St. Lawrence State Hospital, September 24, 1935.
- Fessenden, Dr. Clarence L., assistant physician at the Kings Park State Hospital, was promoted to senior assistant physician, August 15, 1935.
- Fleming, Dr. J. Stuart, was appointed medical interne at the Gowanda State Homeopathic Hospital, September 1, 1935.
- Flemming, Dr. James C., medical interne at the Gowanda State Homeopathic Hospital, resigned December 9, 1935, to take up a similar position in the United States Navy.
- Gioscia, Dr. Nicholai, medical interne at the Harlem Valley State Hospital, was transferred to a similar position at the Kings Park State Hospital, July 15, 1935.
- Gosline, Dr. Anna J., was promoted to senior assistant physician at the Utica State Hospital on August 16, 1935.
- Gray, Dr. Milton, was appointed psychiatric interne at the Psychiatric Institute and Hospital, July 19, 1935.
- Greenburg, Dr. Charles, was appointed assistant physician at the Harlem Valley State Hospital, July 1, 1935.
- Gronlund, Dr. Anna A., assistant physician at the Marcy State Hospital, was promoted to senior assistant physician, August 16, 1935.
- Hale, Dr. Frank A., was appointed psychiatric interne at the Psychiatric Institute and Hospital, September 12, 1935.
- Harlow, Dr. Ralph R., assistant physician at the Manhattan State Hospital, was promoted to senior assistant physician, October 1, 1935.

- Hawkes, Dr. Lawrence P., was appointed medical interne at the Rockland State Hospital, July 1, 1935, and resigned December 31, 1935, to accept an internship at Bellevue Hospital.
- Haynes, Dr. Elmer, was appointed medical interne at the Central Islip State Hospital, November 7, 1935.
- Helmer, Dr. Ross D., clinical director at the Utica State Hospital, was promoted to first assistant physician, July 1, 1935.
- Hogan, Dr. John J., was appointed resident physician at the Syracuse Psychopathic Hospital, July 1, 1935.
- Holtz, Dr. Edward, psychiatric interne at the Psychiatric Institute and Hospital, resigned July 8, to accept position as medical interne at Pilgrim State Hospital.
- Huber, Dr. Warren V., was appointed medical interne at Creedmoor State Hospital, November 1, 1935.
- Huddart, Dr. Viola G., medical interne at the Hudson River State Hospital, went on leave of absence, December 19, 1935, to return November 15, 1936.
- Hunt, Dr. Robert C., was appointed medical interne at the Rochester State Hospital, July 1, 1935.
- Hutchison, Dr. James, medical interne at the Kings Park State Hospital, resigned September 30, 1935.
- Jervis, Dr. George A., was appointed medical interne at Letchworth Village, July 1, 1935.
- Johnson, Dr. Hiram K., senior assistant physician at the Kings Park State Hospital, was transferred to the Rockland State Hospital, September 30, 1935.
- Johnston, Dr. George H., medical interne at the Marcy State Hospital, resigned October 7, 1935.
- Katz, Dr. Siegfried E., senior physician psychiatrist at the Psychiatric Institute and Hospital, died December 14, 1935.
- Kilpatrick, Dr. O. Arnold, assistant physician at the Rockland State Hospital, was promoted to senior assistant physician, September 1, 1935.
- Kleiman, Dr. Charles, medical interne at the Marcy State Hospital, was provisionally appointed assistant physician, July 1, 1935.
- Klein, Dr. Emanuel, assistant physician at the Rockland State Hospital, was promoted to senior assistant physician, September 1, 1935.
- Klein, Dr. Henriette, psychiatric interne at the Psychiatric Institute and Hospital, resigned September 15, 1935.

- Kleiner, Dr. Solomon, assistant physician at the Middletown State Homeopathic Hospital, was promoted to senior assistant physician, September 1, 1935.
- Landau, Jr., Dr. Frederick, medical interne at the Harlem Valley State Hospital, resigned December 31, 1935, to accept a similar position at the Grasslands Hospital.
- Lavin, Dr. Paul R., was appointed medical interne at the Central Islip State Hospital, July 19, 1935.
- Leader, Dr. Arthur J., assistant physician at the Central Islip State Hospital, was promoted to senior assistant physician, September 1, 1935.
- Levy, Dr. Irwin, was appointed psychiatric interne at the Psychiatric Institute and Hospital, July 15, 1935.
- Lewis, Dr. Arthur D., was appointed medical interne at the Utica State Hospital on September 1, 1935.
- Lewis, Dr. C. Vaughan, was appointed medical interne at the Central Islip State Hospital, November 16, 1935.
- Loehner, Dr. Conrad A., was appointed medical interne at the Central Islip State Hospital, November 15, 1935.
- London, Dr. Jack, was appointed medical interne at the Central Islip State Hospital, July 1, 1935.
- Luke, Dr. Harry B., medical interne at the Marcy State Hospital, resigned July 1, 1935.
- March, Dr. Thomas A., was appointed medical interne at the Buffalo State Hospital, November 1, 1935.
- Mardom, Dr. Philip, was appointed medical interne at the St. Lawrence State Hospital, July 1, 1935.
- Marritt, Dr. Henry D., assistant physician at the Gowanda State Homeopathic Hospital, was promoted to senior assistant physician, September 1, 1935.
- Mattax, Dr. James Oliver, appointed medical interne at the St. Lawrence State Hospital, August 1, 1935, and resigned December 9, 1935.
- McGowan, Dr. John E., was appointed medical interne at the Brooklyn State Hospital, July 1, 1935.
- Mearin, Dr. Robert J., appointed medical interne at Creedmoor State Hospital, July 1, 1935.
- Milch, Dr. Eugene C., was appointed psychiatric interne at the Psychiatric Institute and Hospital, November 11, 1935.

- Milici, Dr. Pompeo, assistant physician at the Kings Park State Hospital, was promoted to senior assistant physician, August 15, 1935.
- Mills, Dr. George W., superintendent of the Brooklyn State Hospital, became superintendent of the Creedmoor State Hospital, July 1, 1935.
- Normand, Dr. Alphonse F., medical interne at the Central Islip State Hospital, resigned October 15, 1935.
- Oberlander, Dr. Andrew J., was appointed medical interne at the Letchworth Village, July 1, 1935.
- O'Neil, Dr. Francis J., assistant physician at the Central Islip State Hospital, resigned October 12, 1935.
- Palmer, Dr. Harris H., medical interne at the Rockland State Hospital, resigned December 31, 1935, to accept a similar position at the Grasslands Hospital.
- Palmer, Dr. L. Secord, was appointed medical interne at the Buffalo State Hospital, July 1, 1935.
- Palombo, Dr. Albert S., assistant physician at the Brooklyn State Hospital, was promoted to senior assistant physician, August 16, 1935.
- Parr, Dr. James M., was appointed dental interne at the Brooklyn State Hospital, August 1, 1935.
- Poliak, Dr. Percy P., was appointed psychiatric interne at the Psychiatric Institute and Hospital, September 23, 1935.
- Poulsen, Dr. Eric, appointed medical interne at the Gowanda State Homeopathic Hospital, November 27, 1935.
- Rickless, Dr. Herman, assistant physician at Creedmoor State Hospital, was promoted to senior assistant physician, August 26, 1935.
- Riley, Dr. Peter B., was appointed medical interne at the Brooklyn State Hospital, July 15, 1935, and was transferred to a similar position at the Rochester State Hospital, December 31, 1935.
- Rinker, Dr. John R., assistant physician at the Kings Park State Hospital, resigned August 29, 1935.
- Rossmann, Dr. Murray, assistant physician at the Buffalo State Hospital, was promoted to senior assistant physician, September 1, 1935.
- Ruslander, Dr. David, assistant physician at the Buffalo State Hospital, was promoted to senior assistant physician, September 1, 1935.
- Sabatini, Dr. William, medical interne at the Harlem Valley State Hospital, resigned December 31, 1935, to accept a similar position at the Morrisania Hospital.

- Schaen, Dr. Irvin R., medical interne at the Rome State School, who left the service August 1, 1935, to go into general practice, returned to the institution staff, November 1, 1935.
- Schantz, Dr. Benjamin A., assistant physician at the Middletown State Homeopathic Hospital, was promoted to senior assistant physician, September 1, 1935.
- Schutkeker, Dr. Bruno B., assistant physician at the Buffalo State Hospital, was promoted to senior assistant physician, September 1, 1935.
- Schwartz, Dr. Donald K., assistant physician at the Marcy State Hospital, was promoted to senior assistant physician, August 16, 1935.
- Setnor, Dr. Jules R., was appointed medical interne at the Utica State Hospital on July 1, 1935.
- Sherman, Dr. Steven, psychiatric interne at the Psychiatric Institute and Hospital, resigned July 1, 1935.
- Solomon, Dr. Joseph C., was appointed medical interne at the Kings Park State Hospital, August 1, 1935.
- Spring, Dr. William J., junior physician psychiatrist at the Psychiatric Institute and Hospital, died July 12, 1935.
- Stevenson, Dr. Edward B., was appointed medical interne at the Marcy State Hospital, July 15, 1935.
- Swezey, Dr. Marion, assistant physician at the Gowanda State Homeopathic Hospital, was promoted to senior assistant physician, September 1, 1935.
- Taylor, Dr. Reginald M., was appointed medical interne at the Rockland State Hospital, July 1, 1935.
- Thompson, Dr. Walter A., assistant physician at the Rockland State Hospital, was promoted to senior assistant physician, September 1, 1935.
- Tobin, Dr. Henry L., was appointed medical interne at the Central Islip State Hospital, July 19, 1935.
- Tomlinson, Dr. Paul J., was appointed medical interne at the Gowanda State Homeopathic Hospital, September 1, 1935.
- Tower, Dr. Louise F., was appointed senior assistant physician at the Wasaie State School, October 1, 1935.
- Towlen, Dr. Ralph M., assistant physician at the Central Islip State Hospital, was promoted to senior assistant physician, November 1, 1935.
- Voelkle, Dr. Albert J., senior assistant physician at the Buffalo State Hospital, was transferred to the position of assistant child guidance psychiatrist, Department of Mental Hygiene, September 30, 1935.

- Watts, Dr. Lloyd E., assistant physician at the Hudson River State Hospital, was promoted to senior assistant physician, September 1, 1935.
- Webster, Dr. W. Roberts, assistant physician at the Pilgrim State Hospital, was promoted to senior assistant physician, August 23, 1935.
- White, Dr. Sarah Parker, medical interne at the Hudson River State Hospital, resigned November 30, 1935.
- Wiggers, Dr. Herbert, psychiatric interne at the Psychiatric Institute and Hospital, resigned December 24, 1935.
- Wolfson, Dr. Isaac N., assistant physician at the Hudson River State Hospital, was promoted to senior assistant physician, September 1, 1935.
- Wolfson, Dr. Leo, medical interne at the Hudson River State Hospital, was promoted to assistant physician, July 1, 1935.
- Young, Dr. Reginald J., was appointed medical interne at the Binghamton State Hospital, July 1, 1935.

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- E. Brand, Ph. D., R. J. Block, Ph. D., M. M. Harris, M. D., and
L. E. Hinsie, M. D.
"A Convenient Method for the Preparation of Concentrates and Follicle Stimulating Hormone from Urine." *Proc. Soc. Exp. Biol. & Med.*, 33, 1935.
- William A. Horwitz, M. D., and Meyer M. Harris, M. D.
"Endocrine Therapy in a Case of Psychic Disturbances Related to the Menstrual Cycle." *J. Nerv. & Ment. Dis.*, 82, 551, November, 1935.
- C. Landis, Ph. D., and T. W. Forbes, Ph. D.
"The Limiting A. C. Frequency for the Exhibition of the Galvanic Skin ("psychogalvanic") Response." *J. Gen. Psychol.*, 13, 188-193, July, 1935.
- C. Landis, Ph. D., and S. E. Katz, M. D.
"Psychologic and Physiologic Phenomena During a Prolonged Vigil." *Arch. Neurol. & Psychiat.*, 34, 307-317, August, 1935.
- C. Landis, Ph. D., and W. A. Hunt.
"The Conscious Correlates of the Galvanic Skin Response." *J. Exper. Psychol.*, 18, 505-529, October, 1935.
- C. Landis, Ph. D.
"The Depression and Mental Disease." *Scient. Month.*, 41, 550-553, December, 1935.
- C. Landis, Ph. D., and Olga W. McNemar.
"Childhood Disease and Emotional Maturity in the Psychopathic Woman." *J. Abnormal & Social Psychology*, 30, 314-319, October, 1935.

SYRACUSE PSYCHOPATHIC HOSPITAL

Harold M. Hildreth, Ph. D., psychologist, and
Elinor S. Noetzel, chief social worker.

"A Survey of the Mental Hygiene Needs of 250 School Children." In
PSYCHIATRIC QUARTERLY, Vol. IX, No. 4.

ADMINISTRATIVE OFFICES

Horatio M. Pollock, Ph. D., director of mental hygiene statistics.

"Practical Considerations Relating to Family Care of Mental Patients." In Amer. Jour. of Psychiat., 92, 3, 559-564, November, 1935.

Benjamin Malzberg, Ph. D., senior statistician.

"Mental Disease Among Foreign-Born White with Special Reference to Natives of Russia and Poland." In Amer. Jour. of Psychiat., 92, 3, 627-640, November, 1935.

ADDRESSES, LECTURES, SPECIAL EDUCATIONAL ACTIVITIES

BINGHAMTON

William C. Garvin, M. D., superintendent.

"The Psychiatrist and College Material." Address before Binghamton Psychiatric Society, November 25.

Oswald H. Boltz, M. D., director of clinical psychiatry.

"Psychopathology." Lecture to class in abnormal psychology from Hartwick College, at the hospital, July 12.

Hugh S. Gregory, M. D., pathologist.

"Interesting Postmortem Pathology." Address with lantern slides, before Broome County Embalmers' Association, July 12.

"Causes of Mental Disease." Address before Lions Club, Binghamton, July 20.

Series of six lectures on mental hygiene, with special reference to child guidance, to Junior League of Binghamton, completed October 13.

"Relationship Between Physical and Mental Diseases." Address before parent-teachers association, Chenango Forks, December 10.

Clifford E. Howard, M. D., assistant physician.

"Behavior Problems in the Normal Child." Address before Whitney Point Parent-Teachers Association, December 7.

Case presentation of child behavior problems, before Binghamton Psychiatric Society, December 30.

Malwina T. Lemmle, M. D., medical interne.

Series of talks on sex hygiene, to Girl Reserves, at Binghamton Y. W. C. A., November 1, 15 and 21.

Carl L. Faust, D. D. S., dentist.

"Osteomyelitis." Address at clinic given at the sixty-seventh semi-annual meeting of the Sixth District Dental Society, at Oneonta, September 28.

BROOKLYN

Clarence H. Bellinger, M. D., superintendent.

"Social Service in State Hospitals." Address at a meeting of the Association of Medical Social Workers, at the Kings County Hospital, Brooklyn, December 15.

"What Is Psychoanalysis?" Address at St. Marks M. E. Church forum, November 10.

BUFFALO

H. L. Levin, M. D., clinical director.

Clinical demonstrations of the major psychoses, University of Buffalo and State Teachers' College, psychology and sociology classes, July 20 and 27.

"Mental Hygiene Resources in the Buffalo Area." Contribution to a symposium, Rural School Health Education, State Teachers' College, August 5.

"Mental Hygiene for Parents." New York State Congress of Parents and Teachers, Buffalo, October 9.

"Educating Youth for Social Responsibility." Contribution to panel discussion, Home Economics Section, New York State Teachers' Association, Buffalo, November 1.

"The Workings of a State Hospital." Men's Faculty Club, State Teachers' College, November 7.

Clinical demonstration of cases illustrating the major psychoses. Alfred University psychology classes, November 8.

"The First Symptoms of Mental Diseases; Their Sociological Implications." General Ministers Association, Buffalo Council of Churches, November 25.

Clinical demonstration of cases illustrating the organic psychoses. Sociology and mental hygiene classes, State Teachers' College and University of Buffalo psychology classes, December 14.

H. E. Faver, M. D., senior assistant physician.

"Mental Hygiene of Everyday Life." Women's Round Table, Temple Beth El, Buffalo, December 18.

"What Is Done for a Patient in a State Hospital." Men's Club, Trinity Church, Buffalo, December 23.

CENTRAL ISLIP

Frederick Rosenheim, M. D., senior assistant physician.

"Related Psychoses in Several Members of a Family." Paper read before the Long Island Psychiatric Society, at Central Islip, November 19.

Ethel B. Bellsmith, social worker.

"Relation of the State Hospital to Community Agencies." Address before the Council of Social Agencies, at Riverhead, November 20.

Raphael Henry, assistant social worker.

"Functions of the Social Service Department in the State Hospital." Address at the meeting of the Thirteenth District Nurses' Association, Brooklyn, November 26.

CREEDMOOR

Charles Buckman, M. D., clinical director.

Lecture and clinic on "Organic Psychosis" to students of Adelphi College, August 7.

Frank B. Glasser, M. D., senior assistant physician.

Lecture and clinic on "Functional Psychosis" to students of Adelphi College, August 5.

Jesse L. Bennett, M. D., assistant physician.

"Social Service in the State Hospitals." Address to Sociology Club of Flushing High School, December 16.

GOWANDA

Earle V. Gray, M. D., superintendent.

"Fire Hazards and Fire Prevention." Talk at the high school, Holland, N. Y., October 4.

"Fire Prevention in Rural Communities." Talk at Boston, N. Y., October 8.

"Our Hospital." Talk before Allegany Men's Club, October 23.

Ralph W. Bohn, M. D., director of clinical psychiatry.

"Sins of Omission in Education." Address at annual conference of Chautauqua County Teachers Association, Lakewood, N. Y., October 11.

"The Relation of Education to Mental Health." Lecture to the Chautauqua Parent-Teachers Association, at Jamestown, October 14.

"Epidemic Acute Disseminated Meningo-encephalo-myelitis." Address before meeting of Buffalo Neuropsychiatric Society, at the hospital, October 26.

"Mental Hygiene in the Classroom." Lecture at a faculty meeting of the East Aurora schools, November 12.

"The Relationship of the Home to the Child." Lecture before the Cattaraugus Parent-Teachers Association, November 19.

"The Atypical Child." Lecture before the Atypical Teachers' Club of Jamestown, December 11.

William J. Alleksaht, M. D., pathologist.

"Huntington's Chorea," "Brain Abscess," "Argyria," "Multiple Exostosis." Papers read at meeting of the Buffalo Neuropsychiatric Society, at the hospital, October 26.

Adelbert D. Dye, M. D., senior assistant physician.

"A Case Presentation." Paper read before Buffalo Neuropsychiatric Society, at the hospital, October 26.

Marian Swezey, M. D., senior assistant physician.

"A Case of Multiple Carcinoma." Paper read before Buffalo Neuropsychiatric Society, October 26.

HARLEM VALLEY

Richard H. Hutchings, Jr., M. D., first assistant physician.

"The Need for Clinical Services in Public Schools." Talk before a conference on community services, Yonkers, November 1.

"The Practical Application of Mental Hygiene to the Solution of School Problems." Talk before the teachers of Greenburgh schools, November 21.

Discussion of Dr. Burbank's paper, "The Arthritides," with a preliminary report on plasmatic theory in these conditions, before the Dutchess County Psychiatric Society, November 21.

Harry A. LaBurt, director of clinical psychiatry.

"Some Observations with Family Care of Patients." Paper read at the Quarterly Conference, held at Psychiatric Institute, December 21.

HUDSON RIVER

James P. Kelleher, M. D., first assistant physician.

"Types of Mental Illness." Address and clinical demonstration to a sociology class of Vassar College, November 4.

- "Types of Mental Illness and Forces Promoting Mental Disorder." Address and clinical demonstration to a health education class of New Paltz Normal School, November 6.

Solon C. Wolff, M. D., senior assistant physician.

- Discussion of "Need for Clinical Service in Relation to the Dependent Child." Conference of the mental hygiene services available to Yonkers, N. Y., held November 1.

- "Definition of Mental Hygiene, the History of the Mental Hygiene Movement and Its Aims and Activities." Lectures to the staffs of the Fairview and Viola schools, Poughkeepsie, N. Y., November 21.

- "Child Guidance Clinics and Problems in Mental Hygiene Relating Especially to the Schools." A talk given to the teachers of Viola and Fairview schools, Poughkeepsie, N. Y., December 3.

- "Personality, the Influence of Intelligence on Personality, and the Measurement of Intelligence." Lecture to the teachers of the Fairview and Viola schools, Poughkeepsie, N. Y., December 11.

- "The Parents' Responsibility of Mental Health of the Child." Address to the parent-teachers association of Fairview School, Poughkeepsie, N. Y., December 12.

KINGS PARK

Patricia Steen, M. D., senior assistant physician.

- "Mental Hygiene in Nassau County." Address at annual meeting of the Roslyn District Nursing Association, Roslyn, October 8.

- "Some Aspects of Healthy Child Development." Address at meeting of parent-teachers association at Wantagh, November 13.

- "The Clinic and the Community." Address at the Welfare Forum, Huntington, December 13.

John L. Haskins, M. D., senior assistant physician.

- "Review of Treatment of General Paresis in the Kings Park State Hospital." Paper read at Interhospital Conference, April 18-19.

- "Hobbies, as Psychiatric Outlets." Address at meeting of Rotary Club, Corona, in August.

- "Laboratory and General Paresis." Paper read at the New York Society of Laboratory Technical Assistants' meeting in October.

MANHATTAN

Nobe E. Stein, M. D., senior assistant physician.

Lectured to the following groups of students on the dates indicated:
New York University, with clinical demonstrations, July 19, August 5 and 12, and December 6 and 18.

Discussed a paper "Preparation for Parentage," by Dr. V. E. Fisher, at the annual conference of the Institute of Family Relations, at the George Washington Hotel, October 28.

Caducean Society, New York University. Address on "Modern Trends in Psychiatry." November 22.

Divinity School, Yale University. Lecture and clinical demonstrations on "The Major Functional and Organic Psychoses." November 23.

Maxwell I. Bloomfield, M. D., senior assistant physician.

Gave clinic lecture on psychiatry to group of teachers from the Brooklyn Boro-Wide Teachers' Association, October 19.

Eugene Davidoff, M. D., senior assistant physician.

"A Preliminary Study of the Clinical Course and Prognosis of 450 Cases of Traumatic Psychoses." Paper read at a meeting of the Psychiatric Society of the Metropolitan State Hospitals, at this hospital, October 7. (In collaboration with Dr. Paul Hoch.)

Gave clinics to a group of students from the College of the City of New York, November 2, 15, 16 and December 2.

Ralph R. Harlow, M. D., senior assistant physician.

Lectured, with clinical demonstrations, to a group of students from the School of Adult Education, Yonkers, July 24.

Instructed a group of students from Cornell University Medical College in taking of anamneses and the technique of mental status. Wednesday mornings, during October, November and December.

MARCY

William W. Wright, M. D., superintendent.

"General Aspects of Mental Diseases." Talk before the visiting, consulting and resident staffs at Marcy State Hospital, October 29.

Neil D. Black, M. D., acting clinical director.

The motion picture, "Functions of a Modern State Hospital," together with presentation of cases was given to the students of the Rome Collegiate Center at the Marcy State Hospital on August 1.

"Some Observations as to the Care and Treatment of Patients in State Hospitals." Paper read before a meeting of the Oneida County Medical Society at the Marcy State Hospital, October 8.

"General Symptomatology of Mental Disease." Paper read before a meeting of the visiting, consulting and resident staff at the Marcy State Hospital, October 29.

Charles W. Hutchings, M. D., senior assistant physician.

"Results of Treatment of General Paresis, with Special Reference to Malarial Treatment." Paper read at a meeting of the Oneida County Medical Society at the Marcy State Hospital, October 8.

"Alcoholic Psychoses, Traumatic Psychoses, Psychoses with Epidemic Encephalitis." Paper read before a meeting of the visiting, consulting and resident staff at the Marcy State Hospital, October 29.

John A. Howard, M. D., senior assistant physician.

"Manic-Depressive Psychoses, Involutional Psychoses." Paper read before a meeting of the visiting, consulting and resident staff at the Marcy State Hospital, October 29.

Anna A. Gronlund, M. D., senior assistant physician.

"Mental Disease." Lecture with presentation of cases given to the student nurses of Oneida Board Street Hospital at the Marcy State Hospital, October 25.

"Psychoses with Cerebral Arteriosclerosis, Senile Psychosis, Psychosis with Convulsive Disorders." Paper read at a meeting of the visiting, consulting and resident staff at the Marcy State Hospital, October 29.

"Psychiatry." During November, three lectures were given to the nurses of Broad Street Hospital, Oneida, N. Y.

Donald K. Schwartz, M. D., senior assistant physician.

"Psychoneuroses, Dementia Præcox (schizophrenia)." Paper read at a meeting of the visiting, consulting and resident staff at the Marcy State Hospital, October 29.

Lucy M. Cobb, M. D., medical interne.

"Incidence and Treatment of Trichomonas Vaginalis." Paper read before a meeting of the visiting, consulting and resident staff at the Marcy State Hospital, October 29.

"Personality." Lecture to business girls' group at Y. W. C. A., Utica, N. Y., October 16.

"The Wheel of Life." Lecture to business girls' group at Y. W. C. A., Utica, N. Y., November 8.

Charles Kleiman, M. D., medical interne.

"The Development of Personality." Lecture to a group of business women at Y. W. C. A., Utica, N. Y., November 21.

"Syphilis." Lecture to students of Eastern Academy of Laboratory Technic at Utica, N. Y., December 3.

MIDDLETOWN

Stephen H. Abbate, M. D., senior assistant physician, and
Solomon Kleiner, M. D., senior assistant physician.

"Treatment of General Paresis." Paper presented at the Psychiatric Institute, in April.

Charles B. Huber, assistant physician.

"The Differentiation Between Manic-Depressive Psychosis, Manic Type, and the Excited Episodes of Dementia Præcox." Paper read before the Eastern Homeopathic Medical Society meeting at Boston, Mass., October 28.

John A. Doering, M. D., medical interne.

"Principles and Recent Advances in the Treatment of Fractures." Lecture to the graduate nurses' club, September 24, at hospital.

"Hyperthyroidism." Clinic for graduate nurses' club, November 1, at hospital.

PILGRIM

Arthur E. Soper, M. D., first assistant physician.

Gave an address, "Mental Health in Relation to School and Youth," at the Bay Shore Mother's Club, on November 8.

James A. Brussel, M. D., senior assistant physician.

"Father Divine: Precipitator of Psychoses." *Am. J. Psy.*, 92, 1.

Constance M. Barwise, M. D., assistant physician.

Gave an address at Rockville Center High School to principals and school nurses on "The Child Guidance Clinic and Its Relation to the Schools," on December 17.

Sylvia L. Hotchkiss, social service department.

Gave an address at the High School Health Council, Baldwin, L. I., on "Mental Testing," November 12.

ROCHESTER

Ferd D. Street, M. D., director of clinical psychiatry.

October 28—"Reception of Newly-Admitted Patients." Talk before Junior Auxiliary, Batavia Hospital.

Willard H. Veeder, M. D., first assistant physician.

September 1—"Opening of Radio Season by President of Medical Society of County of Monroe." Radio address.

ROCKLAND

Frank F. Tallman, M. D., senior assistant physician.

"Meeting Life's Problems." Address to the Y. M. C. A. at Nyack, N. Y., October 23.

"The Place of Home Economics in Providing Security for the Adolescent Girl." Address to the Teachers' Conference at White Plains, N. Y., October 25.

"The Importance of Mental Hygiene Attitude in Matters of Discipline." Address to the teaching staff at Congers, N. Y., November 21.

Charlotte Munn, M. D., senior assistant physician.

"Personality Development." Address to a group of trainees for domestic service at Nyack, N. Y., July 31.

"Child Guidance: Its Origin and Its Aim." Address to the parent-teachers association of Spring Valley, N. Y., October 10.

"Training the Youthful Citizen." Address to the parent-teachers association of the Yonkers High School No. 11, November 13.

"Keeping a Normal Child Normal." Address to the parent-teachers association of Monsey, N. Y., November 19.

"Every-day Problems in Child Guidance." Address to the joint parent-teachers association and the parental education group of William Penn High School, Mount Vernon, N. Y., December 12.

Simon L. Victor, M. D., assistant physician.

Presentation of a case of "Cerebral Cerebellar Syndrome" before the New York Postgraduate Medical School and Hospital, New York City, December 6.

Joseph Lander, M. D., assistant physician.

"Observations on Penal and other Institutions in Soviet Russia." Address to the Nyack Rotary Club, October 29.

Ed. Rucker Clardy, M. D., medical interne.

"Child Guidance in Schools and the Part the Teachers Play." Address to the teachers of the Sloatsburg School, October 22.

"The Importance of Parental Education in the Development of the Child's Personality." Address to the parent-teachers association at the Lincoln School, Mt. Vernon, N. Y., November 4.

ST. LAWRENCE

Harold H. Berman, M. D., director of clinical psychiatry.

"Mental Hygiene Program in the Community." Address given to school nurses group at the State Teachers' Conference, Plattsburg State Normal School, Plattsburg, October 17.

"The State Hospital and the Community." Radio talk over Station CFLC, Prescott, Canada.

Heyman Smolev, M. D., senior assistant physician.

"Relation of Mental Hospitals to the Community." Talk given at the Kiwanis Club, Ogdensburg, N. Y., November 14.

"Child Welfare from a Mental Point of View." Talk given at a meeting of the Woman's City Club, City Library, Ogdensburg, N. Y., December 2.

"Mental Hospitals and Their Relation to Mental Health." Address to the Kiwanis Club of Malone, N. Y., December 10.

UTICA

Richard H. Hutchings, M. D., superintendent.

"Hospitals, Old and New, and How They Came About." Address to Neuron Club at Willard State Hospital, Willard, N. Y., September 7.

Ross D. Helmer, M. D., first assistant physician.

"The Misunderstood Child." Address before a meeting of the parent-teacher association, Remsen Central School, Remsen, N. Y., September 19.

"Maladjustment in Children." Address before a meeting of the parent-teacher institute, Little Falls, N. Y., October 2.

"Child Development." Address before a meeting of the Men's Club, Grace Church, Utica, N. Y., October 17.

"The Exceptional Child—the Mentally Different." Address before the parent-teacher association, Parochial School, Ilion, N. Y., December 4.

"Mental Sickness, Care and Treatment." Address before a meeting of the Men's Club, Dryer Memorial Church, Utica, N. Y., December 11.

"Some Danger Signals in the Emotional Development of Children." Address before the parent-teacher association, Prospect School, Prospect, N. Y., December 17.

Newton J. T. Bigelow, M. D., acting director of clinical psychiatry.

"Psychiatry and the Nurse." Address before District No. 7 of New York State Nurses' Association at Hotel Utica, Utica, N. Y., November 13.

Anna J. Gosline, M. D., senior assistant physician.

"Social and Mental Hygiene of the Sex Side of Life." Course of seven lectures to the Industrial Club, Y. W. C. A., Utica, N. Y., during October, November and December.

"Mental Health Aspects of the Parent-Teacher-Child Relationship." Address to the parent-teacher association, Washington School, Utica, N. Y., December 11.

Duncan Whitehead, M. D., assistant physician.

"Child Guidance—A General Consideration." Address before the educational group of the Y. W. C. A., Gloversville, N. Y., October 17.

"Emotional Growth from Infancy to Adulthood." Address before the educational group of the Y. W. C. A., Gloversville, N. Y., December 19.

Cyril J. C. Kennedy, M. D., assistant physician.

"Neuropsychiatric Clinics as Maintained by the Department of Mental Hygiene." Address before the Saratoga County Medical Society at Mt. McGregor, N. Y., October 10.

"The Reason for and the Prevention of the High Incidence of State Hospital Admissions in This Community." Address before the Young People's Society, Tabernacle Baptist Church, Utica, N. Y., November 3.

"The Principal Causes of Mental Disorders and Their Prevention."
Address before the Tau Delta Club, given at the Y. M. C. A.,
Utica, N. Y., November 15.

Eva M. Schied, R. N., head social worker.

"Community Aspects of the State Hospital Program." Address to a
group of provisional Junior League members at their club room
in Utica, N. Y., November 6.

"Mental Hygiene Aspects of Recreation." Address to a group of
W. P. A. recreation leaders at the administration building of the
Department of Education, Utica, N. Y., December 26.

WILLARD

Walter M. Pamphilon, M. D., first assistant physician.

Talk on "Mental Hygiene" to officers and men of the Citizens' Con-
servation Corps, Caroga, N. Y., October 26.

Ross E. Herold, M. D., director of clinical psychiatry.

"Report of a Case of Melano-sarcoma in a Negro" to the Neuron Club,
September 7.

"X-ray Findings in Mental Cases." Given to members of the Seneca
County Medical Society, October 10.

"Clinical Lecture and Demonstration." Given to students from Au-
burn Collegiate Center, November 10.

David S. Evans, M. D., assistant physician.

"Demonstration of the Typical Psychoses." Clinic given to class in
abnormal psychology, Cornell University, July 25.

SYRACUSE PSYCHOPATHIC HOSPITAL

Harry A. Steckel, M. D., director.

"Public Health Aspects of Neurosyphilis." Lecture before the public
health nurses' group of Syracuse University summer school,
August.

"Mental Hygiene Aspects of Physiotherapy." Address before the Cen-
tral New York Chapter of the American Physiotherapy Associa-
tion of Syracuse, September 26.

"Mental Hygiene Application in Personality Development." Address
before a meeting of Y. M. C. A. group leaders, Syracuse, Septem-
ber 27.

- "Public Health Aspects of Mental Hygiene." Lectures to the public health study groups of the College of Medicine, October 3, November 7 and December 12.
- "The Psychology of War." Address before the monthly meeting of Psi Chi, honorary psychology fraternity at Syracuse University, October 17, also before the Foster Study Club of First Methodist Church, Syracuse, October 20.
- "Mental Hygiene Aspects of Modern Social Conditions." Lecture before the Memorial Hospital student nurse group, Syracuse, November 6.
- "Past and Present Concepts of Dementia Præcox." Paper read before the Thursday Night Club (medical), Syracuse, November 7.
- "Borderline Mental States." Lecture before the Oswego Ministers' Study Club at Syracuse, November 26.
- "The Psychiatric Curriculum." Talk before the Tuesday Luncheon Club of the Faculty of Medicine, Syracuse University, December 3.
- "Mental Hygiene and Religion." Informal discussion before the Centurian class of the First Methodist Church, Syracuse, December 29.

Mrs. Elinor S. Noetzel, chief social service worker.

- "Care and Prevention of Mental Illness." Conducted session of the Y. M. C. A. and Y. W. C. A., Christian student movement seminar in the socio-economic study of Syracuse, July 5.
- "Legal and Social Responsibility of the Psychopathic Hospital." Address to combined staffs of Children's Bureau and Family Society, Syracuse, October 11.
- "What Is an Adult?" Address before Eastwood High School Parent-Teacher Association, Syracuse, November 15.
- "Case Recording." Talk to graduate resident students of Syracuse University, November 22.
- "Mental Hygiene for the Business Woman." Address before Business and Professional Women's Club, Syracuse, December 2.

Harold M. Hildreth, Ph. D., psychologist.

- "Religion and Mental Health." Address given at a forum meeting of Grace Presbyterian and First Presbyterian Churches, Oswego, N. Y., November 10.
- "Mental Hygiene and Human Standards." Lecture to the Social Service Committee, Syracuse University, November 14.

"Functions of the Psychopathic Hospital in the Community." Lecture to the Upper New York Alumni Association of Phi Kappa Psi, Syracuse, N. Y., December 2.

LETCHEWORTH VILLAGE

Edward J. Humphreys, M. D., director of research.

Lectures and clinical demonstrations to the following groups of students, on the dates indicated:

July 15—New York School of Social Work. Collegiate branch of Y. M. C. A.

July 20, 24, 27—New York University Summer School.

August 5—Columbia University Summer School.

August 12—Teachers' College, Neurological Institute and School of Adult Education.

November 5—Senior medical students of College of Physicians and Surgeons, Columbia University.

November 14—Psychology class of New York University.

November 26—Teachers from the Binet Schools, Newark, N. J.

November 27—Dental students of Columbia University.

December 26—Two groups of graduate students of the College of the City of New York.

"The Church as a Social Agency in the Field of Mental Deficiency." Talk before the Huntington Ministerium, Huntington, Pa.

Eugene W. Martz, M. D., first assistant physician.

"Some of the Principles Underlying Child Guidance." Lecture before parent-teachers association of Haverstraw.

NEWARK STATE SCHOOL

C. L. Vaux, M. D., superintendent.

"Experience with Family Care." Address before the Seneca County Mental Hygiene Committee, Willard State Hospital, Willard N. Y., October 23.

J. C. Hoeffler, M. D., senior assistant physician.

Clinical demonstration to students of Geneseo Normal School, Geneseo, N. Y., July 31.

ROME STATE SCHOOL

Charles Bernstein, M. D., superintendent.

"The Moron in the Public Schools." Address to a group of special class teachers, visiting nurses and social workers from the department of public welfare and the juvenile court, at Schenectady, October 30.

"The Problem of the Mental Defective in the Community." Talk to a group at the Women's University Club at Waverly, N. Y., November 13.

"The Backward Child in School and His Possibilities in the Community." Address to the high school students' assembly, at Waverly, N. Y., November 14.

Robert A. York, supervisor of boys' colonies and paroles.

"Four Hundred Morons." Lecture to a group of students of Colgate University, at Hamilton, November 21.

"The Educated Idiot." Lecture to a group of students of Colgate University, at Hamilton, November 22.

Ward W. Millias, M. D., director of clinical psychiatry.

Series of seven lectures on abnormal psychology, given at the Rome Collegiate Center; these lectures started November 12.

"Personality Development." Address before parent-teachers association, at the Senior High School, Rome, November 21.

"Habit Training for Children." Address before parent-teachers association of the Barringer and Gansevoort schools in Rome, November 27.

SYRACUSE STATE SCHOOL

Charles E. Rowe, M. D., superintendent.

"The Care and Training of Mentally Defective Children." Address to the junior and senior classes in civics, Onondaga Valley Academy, November 13.

S. D. Deren, M. D., first assistant physician.

"Mental Hygiene" and "Psychology of the Mentally Handicapped." Two systematic courses of 30 lectures each, given to a group of special class teachers, July 9 to August 16.

"Fitting the School to the Child." Lecture to a group of students of the School of Education, Syracuse University, July 18.

"The Problem of the Mentally Deficient." Lecture to classes studying child and adolescent psychology at Syracuse University, July 19.

"Psychology of the Mentally Handicapped." Lecture to class in psychology, Syracuse University, July 25.

Series of four lectures to members of the School of Education, Syracuse University, with the following titles, October 14 through 18.

"Feeble-mindedness—Its Causes and Consequences."

"Social Control of the Mentally Deficient."

"Psychology of the Mentally Deficient."

"Educating and Training the Feeble-minded."

"Why Special Education?" Talk to members of the Connecticut Special Education Association, Hartford, Conn., October 25.

"The Mentally Retarded Problem in Our School System." Lecture to members of the department of psychology, Auburn Junior College, October 31.

"Medical Care in An Institution for the Mentally Deficient." Lecture and clinic to nurses of Syracuse Memorial Hospital, November 12.

"Social Control of the Mentally Deficient." Lecture to classes in the department of sociology, Cornell University, November 21.

ADMINISTRATIVE OFFICES

Horatio M. Pollock, Ph. D., director of mental hygiene statistics.

"My Philosophy of Life." Paper presented at meeting of Philosophical Society of Albany, at Rensselaer Polytechnic Institute, Troy, N. Y., November 20.

Report of Committee on Statistics of Physical and Mental Disorders submitted at annual meeting of American Statistical Association, at Hotel Commodore, New York City, December 28.

Benjamin Malzberg, Ph. D., senior statistician.

"My Philosophy of Life." Address to the Albany Philosophical Society, November 20.

Donald W. Cohen, M. D., child guidance psychiatrist.

"What the Child Guidance Clinic Offers to Social Agencies." Address to social workers of the city of Schenectady, N. Y., November 20.

THE PAST, PRESENT AND FUTURE OF OCCUPATIONAL THERAPY IN THE STATE DEPARTMENT OF MENTAL HYGIENE

BY ELEANOR CLARKE SLAGLE,

DIRECTOR, BUREAU OF OCCUPATIONAL THERAPY

When the title of this paper was suggested to me, it was accepted with considerable alacrity because it offered an opportunity to evaluate the present general field of specialized service and because it also provided an opportunity to take a look down the long lane of memory, where the mile-posts seemed so close together that I scarcely knew where to begin nor end, with so interesting and vital a subject.

Nothing could have been more significant of my own training in the old School of Philanthropy in Chicago than the belief that failure in an undertaking was not a disgrace, but that it was a disgrace not to undertake a task for which there seemed a crying need, in fact a whole virgin field to be developed, one which Jane Addams and Julia Lathrop believed was rich in the potentialities of humanitarian and social-economic service. The students of the school were glad to attempt to crystalize their vision into action.

My own first intimate touch with New York State hospitals was in 1909 when I was privileged to conduct on their summer field trips school students taking the training course in "Occupations for the Insane." I may add that Julia Lathrop had secured an appropriation for such a course and, as usual, invited other states to send students, believing that what was good should be shared.

At least two of the students were from New York, one from Ogdensburg, sent by Dr. Richard H. Hutchings, one from Manhattan State Hospital, sent by Dr. William Mabon. Naturally, New York being my home State, I was greatly interested in the reaction of these students to the lectures and projects which, even, then, included physical exercises, music and many recreational features.

About that time I was also carrying on correspondence with Dr. La-Moure, relative to the training he was attempting at Rochester (New York) State Hospital with groups of dementia præcox patients and which he ultimately was forced to abandon. In his own words, "the reason being that the ordinary attendant or nurse is not equal to this phase of the work. What is needed are teachers who are trained for this particular line of work."

My next professional contact was in 1912 when, at the insistence of Miss Mary Richmond, then of the Board of Managers of Central Islip State

Hospital, I took a short engagement at that hospital, just prior to my going to Phipps Clinic of the Johns Hopkins Hospital in Baltimore to work with Dr. Adolf Meyer. I may add that Mrs. Russell Sage was greatly interested in the undertaking at Central Islip and defrayed part of my expenses. During my stay at Central Islip I was extremely happy in establishing a schedule of activity for patients that carried on for some time most successfully. Dr. George A. Smith, then superintendent, was a strong advocate of patient labor and occupation and gave the work support and encouragement; in fact, the fame of these early classes spread abroad and it is recalled that we had visitors from as far away as Pittsburg, and they were so enthused with the group at work and play that the memory of their high praise has remained all these years.

This covers my personal acquaintance with the work in New York until, in 1918, Dr. Pilgrim invited me to come east from Illinois to address the State Charities and Corrections Convention in Syracuse, and also to speak before the Quarterly Conference of superintendents at Manhattan State Hospital. I was delightfully welcomed at that time and Dr. Pilgrim indicated that he hoped, ultimately, to have me come back to New York State to work. It was some years before his plan was realized; then Dr. Floyd Haviland was the medical member of the commission, Harriet May Mills and Arleigh Richardson the other commissioners who had requested a small appropriation to start State-wide occupational therapy activities, including the item of "director of occupational therapy."

This item having been approved by Governor Miller, the requirements and the qualifications having been established by the Civil Service Commission, the duties of the position well defined, a candidate was secured through competitive examination. It might be stated that four men and one woman were approved for examination; both written and oral examinations were required. On July 1, 1922, a director of occupational therapy received temporary appointment; three months later the appointment was confirmed. However, at that time there were 13 hospitals in the service and the first requirement was a study of any occupational work under way, to be followed by suggestions for improvement; to further the technical studies of some specially selected workers by placing them in centers of instruction; to purchase some equipment and to employ a few well-qualified workers. The appropriation referred to was for \$13,000.

The total number of patients under treatment on July 1, 1922 was 1,800, according to my own study and the figures available in the statistical office.

In April or May, 1922, I was invited to take a place on the program of the Northern New York State Federation of Women's Clubs by Mrs. Julius

Frank. Mrs. George D. Hewitt was then State president and Mrs. Mary Goodale an interested member, all three being members of the Board of Managers of St. Lawrence State Hospital. I may add that Dr. Paul Tadden was to present the principal communication at the meeting and it is probable that he was quite anxious about my orthodoxy pertaining to State hospitals, but at least he extended a friendly welcome then, and has many times since.

Splendid papers have been written and many references made to the early interest in occupations, and studies of their effect on patients have been made from time to time by various medical men of the State service. The principal reason for lack of continuity of the work in the distant past, as I see it, is exactly what Dr. LaMoure expressed, the lack of interest of those not especially trained for the work.

In each specialized field of hospital service there is, naturally, a presupposed definite plan of procedure; certainly careful guidance of any plan hinges on such a study. This was required by the State Hospital Commission, with the request that a rough graph be prepared covering main points of organization that could be considered for each hospital of the service, and I am glad to submit, for your information, the original graph which was offered for study at that time.

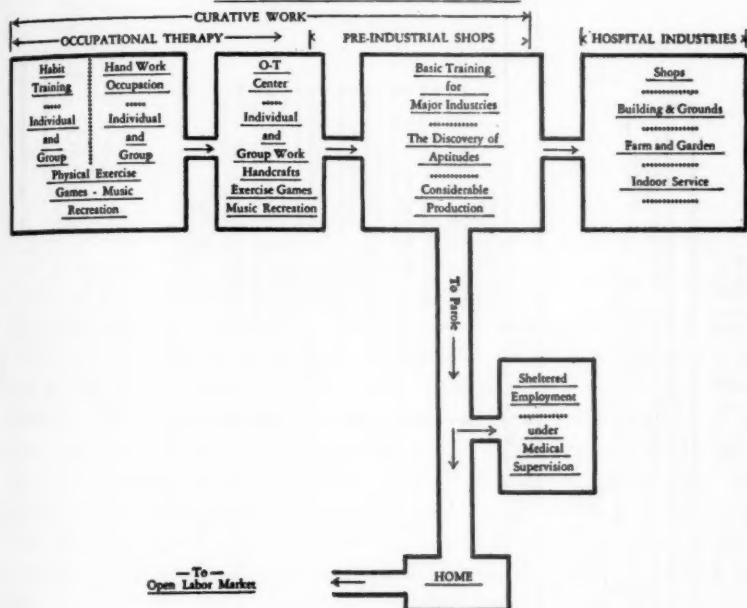
It is well to mention one of the outstanding features of the hospitals of the State department is that though they were built for a *specialized* service, that is, to treat mental and nervous diseases, it was very plain to be seen that mental unbalance was only about half the story, for one may find tuberculous, orthopedic, surgical, pediatric, occasionally blind and occasionally obstetric cases; in fact, the general run of physical disorders plus the mental disturbance which was the primary cause of hospitalization. Interrelation of physical and mental factors and almost *no* case of pure mental or physical disorder.

The department has undergone many changes since that day in 1922 when I was privileged to take over the direction of occupational therapy. No longer is it the State Hospital Commission, but the State Department of Mental Hygiene, functioning under a single Commissioner, Dr. Parsons; and instead of 13 hospitals there are now 26 institutions included in the Department of Mental Hygiene, and in most of these one may find a department of occupational treatment which is a really going concern, and all chief occupational therapists have been members of the staff for some years.

The general policy regarding occupational therapy in our hospitals has been very clearly stated by the Commissioner, Dr. Frederick W. Parsons, who says,

STATE OF NEW YORK
 DEPARTMENT OF ARCHITECTURE - DIVISION OPERATING & PLANNING RESEARCH
 949 BROADWAY - NEW YORK
 CHART SHOWING PATIENT RECONSTRUCTIVE WORK - STATE HOSPITAL COMMISSION
 NEW YORK STATE HOSPITALS FOR THE INSANE
 . . . RECONSTRUCTION . . .

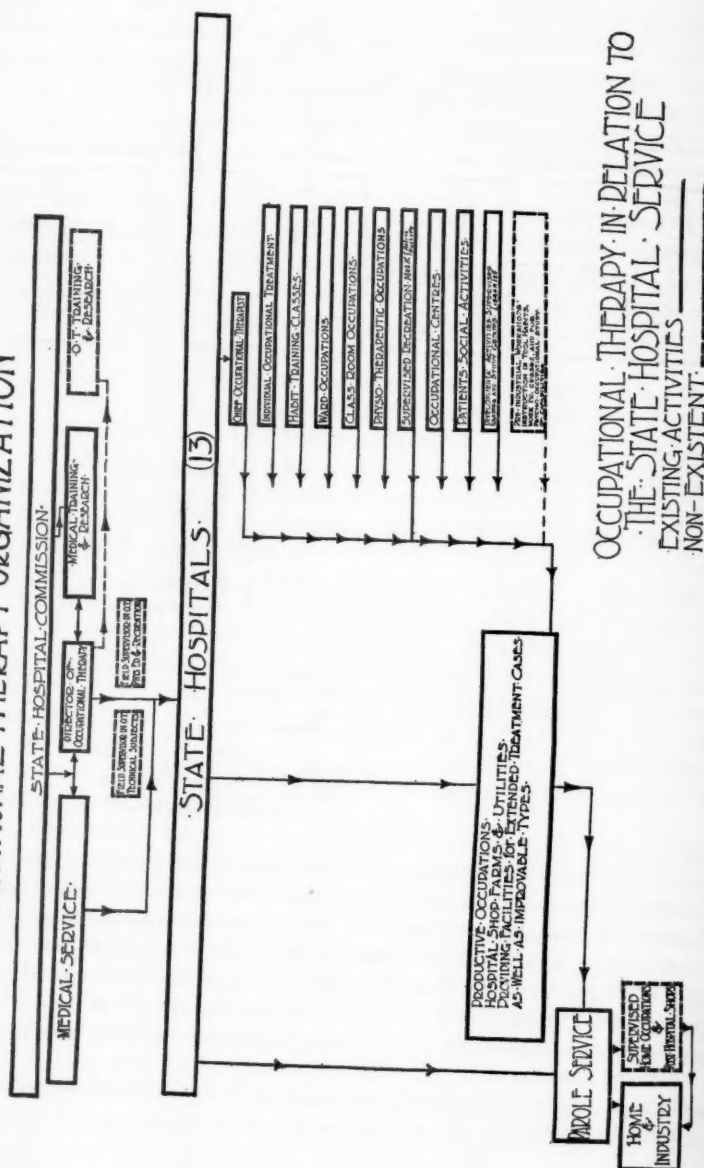
CHART D-1



Note—Adapted from Original Wall Chart
 Compiled by—Eleanor C. Slagle
 Bureau—Occupational Therapy
 New York State Dept. Mental Hygiene

“Believing that the tendency to intellectual and emotional deterioration is increased if persons with mental disease are not systematically occupied, and that occupational therapy under medical direction, administered by trained specialists of that field, combats this tendency, it is the policy of the New York State Department of Mental Hygiene to provide occupational therapy opportunities for all patients whose mental and physical condition makes it possible for them to engage in directed manual activity, physical training and recreation.” (All three elements are included in what is called a balanced occupational therapy program.)

OCCUPATIONAL THERAPY ORGANIZATION



OCCUPATIONAL THERAPY IN RELATION TO
THE STATE HOSPITAL SERVICE
EXISTING ACTIVITIES
NON-EXISTENT

NUMBER OF PATIENTS FOR WHOM OCCUPATIONAL THERAPY PRESCRIPTIONS WERE WRITTEN
SINCE 1922

Fiscal year	Total for year	Increase	Decrease
1933-1934	40,702	6,154	
1932-1933	34,548	2,239	
1931-1932	32,309	5,104	
1930-1931	27,205		1,057
1929-1930	28,262	1,356	
1928-1929	26,905		84
1927-1928	26,989	13,440	
1926-1927	13,549	2,170	
1925-1926	11,379	1,531	
1924-1925	9,848	2,409	
1923-1924	7,339	1,999	
1922-1923	5,340	3,540	
July, 1922	1 800 approximately		

One year after the department of occupational therapy was inaugurated, a male assistant, supervisor of physical training, was secured through the Civil Service Commission, and six years thereafter a chief occupational therapist of the State department was added to the staff as assistant to the director and served two years in that capacity. After her resignation, another occupational therapist qualified by civil service examination for the position of assistant director and served until August of the present year.

Perhaps there is no better time for me to pay high tribute to my assistants and to all chief occupational therapists and members of their individual staffs, both occupational therapy and physical training, who have worked in so fine and cooperative a manner with the aims and ideals of this newer service. Not all have had a clear vision to be sure, but, by and large, the occupational therapists are a distinct addition to the State hospital group of workers and have shown, by their activities, sincere and honest belief in their ability to make a contribution to the work with mental patients.

Function:

Occupational treatment is entirely a medical function and responsibility. Having a stated policy, logically the procedure is for the medical officer to formulate a schedule, by conference with the chief occupational therapist or occupational therapist, for each patient; the individual patient to become, in time, a part of a group, for working with large numbers is the only hope of resocializing patients with fair promptness in large hospitals. From

each large group, a few patients can be selected for a smaller group and so on until, by a process of selection, not elimination, the work efforts and social responsibility of each may be studied. The graph which is displayed clearly indicates the plan for movement of patients in the occupational therapy departments since 1923.

Forms and Records:

It was realized that if occupational therapy was to be inaugurated, the adoption of a system of forms and records was absolutely necessary; the full cooperation of the statistical bureau was assured almost in advance. In fact, the whole idea of an occupational program has always had not only the support of the commissioners but the encouragement of the director of the bureau of statistics, Dr. H. M. Pollock, who had an opportunity to observe similar organization in Illinois. With a general medical man, Dr. Pollock and myself cooperating, a system was drafted that was found adequate for the individual hospitals as well as the statistical bureau, and it is in general use today.

Insanity undoubtedly inflicts greater social disabilities upon the sufferers than any other type of sickness. Because there are many more suffering from mental disabilities than all other types of illness put together, and the costs of properly caring for those so affected, both inter-mural and extra-mural, are mounting rapidly—because of these very serious considerations, I am reviewing briefly what occupational therapy has added in the organized program.

It is the particular social problem of enormous numbers that have a strong and unquestionable claim to public care that demands our serious attention today. Just what it must consist of in *State hospitals*, what standards of service or rather patterns of hospital service, are being laid down for the vast number under State care in New York, (65,373 patients in hospitals; 13,839 in schools and 2,479 in Craig Colony; a total of 81,691) that are the responsibility of the department. There were, on June 30, 1923, 19,394 women and 21,908 men, a total of 41,302 patients. What can occupational therapy add to its program to keep up with the march of time; who is qualified to take up the duties?

The immediate objectives of the State Department of Mental Hygiene are, of course, proper housing. During the World War period it was difficult to secure appropriations for new buildings or even repair old ones.

Many members of the medical service of the New York State hospitals rendered conspicuous and fine service during the period that this country was an active participant in the world tragedy; therefore it was not as dif-

difficult for them to see the need of adding this newly-organized, professional activity.

A thing that seemed very clear in the beginning was that whatever there was of value in the past program of occupational therapeutics must be preserved; at the same time, experience in the few years preceding the World War and during the war forced belief that the old social-economic order was passing rapidly. That patients in mental hospitals and their social needs dared to be frankly understood, and it was this newer perception of their needs that also dared to be met. Many of the medical officers were either active participants or important consultants in psychiatric procedure during the war period and were eager for a change in management of patients. For that reason, a definite place was quickly found for the professionally trained occupational therapist.

May I ask your indulgence, please, while I quote directly from documentary matter furnished the War Department by the Surgeon General's office relative to occupational therapy.

"It was the consensus of opinion of the officers that came most closely in contact with occupational therapy that to it *must* be credited much of the success of the newer psychiatric work.

"A second element of success was that, from the beginning, the necessity of occupational therapy was insisted upon and it was given an important place in the scheme of hospital organization. It was not subordinated to any service except medical; from the beginning it was really a therapy under the immediate direction of the physicians; and occupational therapists were responsible to him alone.

"Systematic employment was furnished to restless patients, reduced the introspection of neurotics and delusions of the insane, seemed to shorten the duration of the præcox or manic episode of the psychosis."

This quotation is made because, at the time of the World War, only one state of the Union was actually organized in a large way to carry on the rehabilitation and therapeutic program expected of occupational therapists, and that state was Illinois, still under the strong influence of Julia Lathrop, Jane Addams and Dr. Meyer.

At the close of a somewhat lengthy narrative on occupational therapy, mention was made of the extended use in one hospital of a library that had gathered together 4,000 volumes and that every effort was made for patients to play musical instruments, to put on their own shows, etc., etc.

The actual objectives of the difficult task have been kept clearly in view; that is, under medical direction to help bring the patient, if possible, in

contact with reality, the environment and the people with whom he lived—all to the end that the patients, for the most part, should realize that whatever was done *was* for their benefit, and under medical direction.

It is of more than passing interest to note that many of the private institutions, licensed in New York for the care of patients with mental disease, have been able to place qualified occupational therapists on their staffs, and in each case this bureau has been able either to secure or recommend candidates, with practically the same qualifications as those required in State hospitals as follows:

BLOOMINGDALE HOSPITAL—WOMEN'S DIVISION

St. Vincent's Retreat

Stony Lodge

Interpines

Louden-Knickerbocker Hall

Halcyon Rest

West Hill

The Veterans' Facilities at Northport, at No. 81, and at Canandaigua have Federal civil service units of occupational therapists.

The following hospitals have departments, though the inauguration of them cannot be credited to State influence.

Four Winds

Brigham Hall

Craig House

Falkirk

Twin Elms

Habit Training:

While habit training, with its very clear hourly schedule, is indicated for many of our patients, it is a term that was not intended for the majority of patients; neither is it a term that was intended for indefinite use, but rather to the point where "guidance" would be substituted. Under the schedule there were many patients who needed to be brought up to a decent level of living, and many of these patients were found in the so-called "back wards." A remarkably large number 12 years ago; a very much smaller number now.

This hourly schedule was the only habit pattern that could be immediately offered the children's unit when first inaugurated at Kings Park. A very careful study of the situation of the veterans' unit, also at Kings Park, showed the need of habit training. (Kings Park at that time was a contract veterans' hospital.) Together, Dr. Garvin and I worked over the problem of these young men, with the larger part of their lives ahead of them, and as a result we established two programs, to be carried out by the veterans' units. The young woman whom we selected to supervise this work was so indignant about it that she nearly resigned, but has since made

so important a contribution that now, many years after, aides are being sent from facilities over the country for special training under her supervision, and habit training looms large in more advanced vision of care.

In New York State at least, while habit training is thoroughly established, we constantly carry on all those other steps which have helped to develop interests and unsuspected skills. There is scarcely time to point out all of the truly beautiful and useful types of work accomplished for the hospital, or the satisfaction that has come to patients so employed.

An effort is made, of course, to segregate this group, to prevent their coming in contact, if possible, with older or more advanced cases of mental disorder, realizing as we do the impressionability and imitativeness, a more or less unconscious response, which must be avoided. Where it is indicated, a habit training program has been known to help adjust patients more quickly than anything else, and serves to hold them to a level of cooperation if not of work accomplishment. Perhaps a good deal of this product is not of use to the hospital, but it has added greatly to the satisfaction of the patient and assisted greatly in the social adjustment of many.

In schools for the feeble-minded, particular at Letchworth and Newark, the careful grading of projects is certainly a manual test of great value; in fact, the occupational activities in both these schools deserve analytic research that time does not permit. The occupational tests are, not infrequently, of far greater value than only intelligence tests, used in the past; these manual tests doubtless will play an important part in the future life of the child.

Very little in the way of special building has been provided. The occupational therapists and physical training instructors have put their shoulders to the wheel in any corner and started to "leaven" the lump of unemployables with the result, as stated before, that enormous numbers are reached through the approved program. Fortunately, less space is required for patients fed on the cafeteria plan than when served in a dining room so, as time goes on, more and more old dining rooms will be available for shop purposes and will be suitably equipped and used without any great extra expense to the State.

The new pre-industrial shop at Hudson River State Hospital almost outgrew the provision for patient accommodation within the first few months.

The "Shop in the Woods" at Gowanda is still very beautiful, even though it was rebuilt only as a temporary shop.

The pre-industrial shop at Buffalo is an enlarged old isolation cottage; and so on to altered old power houses, showing the response of superintendents to the needs of patients. Even the entirely new hospital units have

been built to house the sick. Sometime in the future, one dares to dream of fine hospital shops, planned and built for occupational treatment.

From habit training classes, on through the ward work, the occupational centers and through the pre-industrial shop, there is an opportunity for intensive observation of the individual, his reactions, social relationships with others, etc. With men in particular it is important that the pre-industrial shops be stressed for the so-called "unemployables." The discovery of aptitudes of individuals and the gradual withdrawing of formal physical training exercises and less and less time spent in games and recreation, to the standpoint of considerable production. If the adjustment of the patient has been a satisfactory one, both from the work standpoint and a social standpoint, one of the steps is toward parole and to the home and open labor market, or it is toward the hospital industries.

At this point it is well to point out that if patients, either men or women, flow on to the regular hospital maintenance industries, and particularly if the patients are likely to remain a good part or perhaps all of their future lives in the institutions, it is better, far better, to have given them their occupational opportunities, to have wakened them to a conscious level of limited social responsibility even though we are more anxious to see the patient paroled home.

It seems probable that a plan for a half-way house could be formulated, call it sheltered employment or any name that may seem best to attach to it, but at least a place in which some of the questionable cases should have their chances for parole checked up more thoroughly; a shop that still belongs to the hospital but where the hours of duty, in fact the entire life, is spent away from the larger groups of patients. If the reaction is a suitable one, it is perfectly believable that the patients may go on to their homes and to the open labor market.

We need not at this time think of, or discuss even, the possibility of any retraining in vocation. Not many of our patients are in the hospital as a result of the work they have done outside of the hospital and certainly the cost of equipping for vocational training should not be presented until that happy time when providing for the actively sick is adequately taken care of.

Between these two, habit training and pre-industrial shops, they offer what we might call educational work, though industrial. One may find, in informal contact with patients, just the key that will unlock the door of their future happiness and well being in community life. It has not seemed necessary to go into the details of all the work that is being done in the hospitals under occupational treatment, except for the fact that it provides

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stimulus for sending patients on to more advanced tasks, both mental and social as it were, and assists in adjustment to the situation.

Of the present, I need only to remind you again that the program which has been inaugurated in the State Department of Mental Hygiene has reached 40,702 patients during the fiscal year 1934-1935, making a general average of over 20,000 patients who received treatment daily.

The Future for the Occupational Therapist:

In another year, the training of the occupational therapist, in this city at least, is likely to be undertaken by Columbia University, along with the training of nurses. Dean Rappleye of the Medical School, is keenly alive to the need of training. He not only recognizes occupational therapy as an adjunct to medicine, but he believes sufficiently in the trained worker that he is desirous of seeing the course inaugurated. Certainly New York State offers a wide field for practice training.

The New York University will offer an intensive refresher course in physical training for credits next year. This course, in all likelihood, will be given at Rockland State Hospital, with lectures and contacts with other hospitals and institutions in that immediate locality. Undoubtedly this work presents an unusual recognition of physical training in the field of mental hygiene and, in particular, the theoretical classes which will be offered at Rockland State Hospital.

Twenty-three physical training instructors in the hospitals and schools of this department are graduate workers.

These courses undoubtedly will meet current standards, for whether one believes in them or not, the modern trend is certainly toward arbitrary requirements for both of the courses.

It was a pleasure to read, not long ago, that surgeons were licensed in the middle ages as craftsmen and required to join a guild, the guild being the stabilizing agency, quite guaranteeing a member as qualified to practice, but they were frequently also members of the blacksmith guild, so they could make their own instruments, etc. I may also mention the fact that in the early ages priests were also expected to study crafts diligently.

The Future:

Aye, there's the rub! No matter how wisely a structure is built to meet present needs, another era will usher in even greater changes in social understanding of mental patients.

Is the boarding home going to settle the matter? Will all the men patients be interested in participating in the chores of the premises of their

boarding homes? Will all of the women be satisfied with domestic life and work in the field of needlecraft? What should be provided?

It was the constant nagging of this question which led me to visit Gheel. What manner of occupation, as a therapeutic measure, is carried on in that colony? Was the occupation of their foster homes sufficient to keep them interested? In what way did the "sicks and unhappies" differ from patients in New York State Hospitals? What, if anything, was substituted for the busy-ness of so-called normal American women or men? The "finger minded" and the Jack-of-all-trades"? The movies, cards, radio, riding around the country in motor cars? What, if anything, was ever quite normal to these individual patients?

In no way can the lives of patients in hospitals, or even in boarding homes in this country, be compared to the plan at Gheel, where the entire life of the community is influenced and guarded by St. Dymphne, and the religious orders dominating the community. The spirit of the colony greatly reflects this influence. In fact the medical director, Dr. Sano, countered my own question as to the part psychoanalysis played in the colony when he said, "Why, we have the priests."

Certain it is that one strong recommendation can be urged. A closer tie-up between the three departments that are most closely identified with the possible parole of a patient—the clinical director, the chief occupational therapist or occupational therapist, and the social worker. The physician of the reception service should be asked for suggestions.

A job is not enough, but a job of interest to the patient is the consideration. Just getting a patient *out* is not enough to satisfy the physician.

The occupational opportunities are provided in our hospitals. Is the most intelligent use being made of these opportunities?

FEDERAL CENSUS OF MENTAL DEFECTIVES

The United States Bureau of the Census has recently issued a bulletin entitled "Mental Defectives and Epileptics in Institutions, 1933." This bulletin is based upon a census of all such patients in institutions for mental defectives and epileptics on January 1, 1933, and those admitted during 1933. Returns were received from 156 institutions—78 state, 3 city, and 75 private institutions.

There were 102,618 patients on the books of these institutions on January 1, 1933. Of these, 96,127 were in state institutions, 1,939 in city institutions and 4,552 in private institutions. During the year there were 12,028 first admissions, and 1,124 readmissions; 683 patients were received by transfer from other institutions for mental defectives and epileptics. The total under care during the year was 116,453. Of these, 5,393 were discharged during the year, 2,511 died, and 1,785 were transferred to other institutions. There remained on the books at the close of the year a total of 106,764, of whom 93,150 were in institutions, and 13,614 on parole.

The number of such patients in state institutions has increased steadily. On January 1, 1928, there were 68,269 on the books. Six years later the total had increased to 100,676. The number in institutions per 100,000 of general population increased from 52.3 on January 1, 1928, to 69.1 on December 31, 1933. The growth probably resulted from increases in provisions for mental defectives and epileptics in special state institutions, and therefore does not indicate a corresponding growth in the prevalence of mental deficiency and epilepsy.

The highest rates of patients in state institutions on December 31, 1933, per 100,000 population, occurred in the northeastern and central divisions of the United States. The lowest rates occurred in the South Atlantic and South Central states. The minimum, 8.7, occurred in the state of Georgia, the maximum, 154.4, in Massachusetts.

Of the 10,806 first admissions in 1933, 7,356 were mentally defective but not epileptic, 970 were epileptic but not mentally defective, and 1,476 were both mentally defective and epileptic. A total of 8,832 were thus mentally defective and 2,446 epileptic.

GENERAL STATISTICAL INFORMATION RELATING TO STATE HOSPITALS, STATE SCHOOLS AND CRAIG COLONY

CENSUS OF JANUARY 1, 1936

Patient population:

Civil State hospitals:

In hospitals	61,504
In family care	150
On parole	5,610
	<hr/> 66,814

Dannemora and Matteawan 2,236

Private licensed institutions for mental disease..... 3,671

Institutions for mental defectives:

In institutions proper	10,671
In colonies	1,778
In family care	125
On parole	1,660
	<hr/> 14,234

Licensed institutions for mental defectives 332

Institutions for defective delinquents 1,273

Craig Colony for epileptics 2,417

Grand total 90,977

Certified capacity of civil State hospitals 55,943

Certified capacity of institutions for mental defectives..... 9,421

Certified capacity of Craig Colony for epileptics 1,750

Medical officers in civil State hospitals..... 366

Medical officers in institutions for mental defectives..... 43

Medical officers in Craig Colony for epileptics 11

Employees in civil State hospitals 12,205

Employees in institution for mental defectives..... 2,114

Employees in Craig Colony for epileptics 348

GENERAL STATISTICAL INFORMATION

159

MOVEMENT OF EMPLOYEES IN THE CIVIL STATE HOSPITALS DURING THE SIX MONTHS ENDED DECEMBER 31, 1935

STATE HOSPITALS	In service, July 1, 1935			Engaged			Left service			In service, December 31, 1935			Vacancies December 31, 1935			Number of patients, excluding parolles, December 31, 1935, to each		
	Medical officers	Ward employees	Other employees	Medical officers	Ward employees	Other employees	Medical officers	Ward employees	Other employees	Medical officers	Ward employees	Other employees	Medical officers	Ward employees	Other employees	Medical officer	Ward employee	Employee
Binghamton	14	305	238	3	49	21	..	52	23	17	302	236	1	15	9	163.8	9.2	5.0
Brooklyn	20	181	208	5	77	28	3	36	15	22	222	221	..	..	2	66.2	6.6	3.1
Buffalo	13	261	196	2	68	14	2	62	14	13	267	196	2	..	20	202.8	9.9	5.5
Central Islip	32	702	360	5	134	31	3	129	33	34	707	358	4	43	29	201.9	9.7	6.2
Creechmoor	15	426	273	4	191	56	..	186	55	19	431	274	..	4	10	206.1	9.1	5.4
Gowanda	10	136	146	3	50	11	2	20	8	11	166	149	3	78	55	118.2	7.8	4.0
Harlem Valley	19	473	259	1	195	40	3	171	38	17	497	261	3	..	11	258.4	8.8	5.7
Hudson River	27	481	391	1	82	31	3	78	31	25	485	391	3	4	5	177.4	9.1	4.9
Kings Park	27	546	462	4	181	84	4	154	46	27	573	500	..	..	..	176.6	8.3	4.3
Manhattan	24	413	368	..	35	43	..	35	42	24	413	369	..	..	..	138.5	8.0	4.1
Marcy	13	271	234	3	38	14	1	36	13	15	273	235	4	..	8	173.0	9.5	5.0
Middletown	19	334	231	..	49	20	..	40	11	19	343	240	2	1	10	156.2	8.7	4.9
Pilgrim	21	603	296	2	302	69	..	218	44	23	687	321	..	..	..	257.2	8.6	5.7
Psy. Inst. and Hosp. ..	17	79	139	3	7	9	7	10	7	13	76	141	4	3	1	12.4	2.1	0.7
Rochester	14	275	193	2	79	27	..	38	15	16	316	335	1	12	5	186.6	9.4	5.6
Rockland	26	511	320	6	185	32	3	158	23	29	538	304	1	52	32	141.2	7.6	4.5
St. Lawrence	12	229	201	3	104	19	2	91	18	13	242	202	3	15	8	157.1	8.4	4.5
Syracuse Psy. Hosp. ..	3	50	23	1	12	2	1	14	3	4	48	22	..	3	1	16.3	1.0	0.7
Utica	10	182	217	3	33	12	1	32	13	12	183	216	..	6	12	136.3	8.9	4.0
Willard	13	295	267	1	30	21	..	23	25	14	302	263	4	1	27	195.3	9.1	4.7
Total	349	6,753	5,022	52	1,901	589	35	1,583	477	366	7,071	5,134	35	237	245	173.8*	8.8*	5.0*

*Excluding Psychiatric Institute and Hospital and Syracuse Psychopathic Hospital.

GENERAL STATISTICAL INFORMATION

MOVEMENT OF PATIENTS IN THE CIVIL STATE HOSPITALS DURING THE SIX MONTHS ENDED DECEMBER 31, 1935, AS REPORTED BY SUPERINTENDENTS, AND STATEMENT OF CAPACITY AND OVERCROWDING, DECEMBER 31, 1935

STATE HOSPITALS	ADMISSIONS				DISCHARGES							Census, Dec. 31, 1935	Certified capacity	OVERCROWDING	
	First admissions	Readmissions	Transfers	Total	Recovered	Much improved	Improved	Unimproved	Not insane	Died	Transferred	Total		Number	Per cent
Binghamton.....	211	66	..	277	54	27	28	14	8	104	57	292	2,391	394	16.5
Brooklyn.....	959	238	6	1,203	125	63	69	24	1	258	496	1,036	1,703	-246	....
Buffalo.....	287	61	9	354	53	50	36	18	1	86	2	246	1,982	654	33.0
Central Islip.....	505	132	13	650	216	169	80	39	2	173	12	691	5,712	1,151	20.2
Creedmoor.....	1	1	480	482	96	66	37	10	..	124	35	368	4,434	3,504	41.2
Gowanda.....	1,446	137	49	5	191	36	20	26	20	7	49	2	1,477	-806	....
Harlem Valley.....	4,534	279	23	373	13	19	16	9	2	120	12	191	4,716	3,972	421
Hudson River.....	4,618	232	91	7	330	63	31	28	17	2	151	5	4,651	4,014	421
Kings Park.....	358	171	53	582	89	120	74	24	2	98	35	442	5,232	736	18.3
Manhattan.....	1,163	139	2	1,304	192	75	61	54	..	398	263	1,043	3,866	..	....
Marcy.....	258	37	14	309	39	43	32	15	5	106	112	356	2,817	455	21.3
Middletown.....	133	52	6	191	43	29	23	12	5	87	2	201	3,176	187	6.7
Pilgrim.....	42	5	269	316	11	30	28	8	..	128	16	221	6,050	5,915	....
Psy. Inst. and Hosp.	148	13	1	162	18	31	33	30	17	2	4	155	303	-49	....
Rochester.....	298	43	204	545	32	42	17	19	6	78	9	203	2,748	237	8.6
Rockland.....	446	167	5	618	85	94	97	37	..	160	13	486	4,559	344	9.2
St. Lawrence.....	2,298	141	26	1	168	62	14	10	9	96	59	251	1,721	321	18.7
Syracuse Psy. Hosp	55	278	69	1	348	60	52	21	22	73	6	119†	50	-11	....
Utica.....	1,839	188	54	248	57	32	28	7	3	79	13	224	1,863	299	22.4
Willard.....	2,860	152	1	205	30	26	33	3	..	99	7	198	2,867	191	7.5
Total.....	6,216	1,537	1,103	8,856	1,374	1,033	777	411	144	2,402	1,273	7,414	55,943	5,171*	9.3*

*Excluding Psychiatric Institute and Hospital and Syracuse Psychopathic Hospital. †Committed to other institutions.

GENERAL STATISTICAL INFORMATION

MOVEMENT OF PATIENTS IN THE STATE INSTITUTIONS FOR MENTAL DEFECTIVES AND EPILEPTICS DURING THE SIX MONTHS ENDED DECEMBER 31, 1935, AS REPORTED BY SUPERINTENDENTS AND STATEMENT OF CAPACITY AND OVERCROWDING ON DECEMBER 31, 1935

State Institutions	Census, July 1, 1905	ADMISSIONS				DISCHARGES						Census, Dec. 31, 1905	Certified capacity	OVERCROWING IN INSTITUTIONS		
		First admissions	Readmissions	Transfers	Total	Improved	Unimproved	Not mentally defective	Not epileptic	Died	Transferred			Total	Number	Per cent
State Schools for																
Mental Defectives																
Letchworth Village	3,144	208	15	2	225	58	22	..	..	13	..	93	2,460	672	27.3	
Newark	2,291	176	10	3	189	29	30	..	..	5	5	76	2,404	247	17.0	
Rome	3,446	185	25	3	213	78	17	..	..	35	5	135	3,524	348	22.6	
Syracuse	1,408	70	2	..	72	19	11	..	..	..	1	31	1,449	565	..	
Wassaic	3,550	128	15	11	154	71	28	..	..	23	1	123	3,581	..	..
Total	13,859	767	67	19	853	255	108	..	..	83	12	458	14,234	1,250	13.3	
Craig Colony for																
Epileptics	2,479	180	11	..	191	36	151	..	2	64	..	253	2,417	387	22.1	

VOL. 10

JULY, 1936

No. 2

THE PSYCHIATRIC QUARTERLY SUPPLEMENT

RICHARD H. HUTCHINGS, M. D., Editor

CLARENCE O. CHENEY, M. D., Associate Editor

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DR. FREDERICK W. PARSONS, *Commissioner*

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MINUTES OF THE QUARTERLY CONFERENCE

MARCH 21, 1936

The Quarterly Conference of the State institution visitors and superintendents with the Commissioner of Mental Hygiene, was held at the State Office Building, Albany, N. Y., March 21, 1936.

Present—

FREDERICK W. PARSONS, M. D., Commissioner of Mental Hygiene.
LEWIS M. FARRINGTON, secretary, Department of Mental Hygiene.
HORATIO M. POLLOCK, Ph. D., director, Mental Hygiene Statistics.
HELEN A. COBB, assistant secretary, Department of Mental Hygiene.
MRS. ELEANOR C. SLAGLE, director, bureau of occupational therapy.
DONALD W. COHEN, M. D., child guidance psychiatrist, Department of Mental Hygiene.
PHILIP SMITH, M. D., medical inspector.
MRS. MARGARET CARPER, child guidance clinic worker.
MRS. ESTHER S. STEWART, child guidance clinic worker.
MRS. ALICE W. GODDARD, child guidance clinic worker.
MISS ANNA SARASON, child guidance clinic worker.
WM. C. GARVIN, M. D., superintendent, Binghamton State Hospital.
CLARENCE H. BELLINGER, M. D., superintendent, Brooklyn State Hospital.
JOHN A. PRITCHARD, M. D., superintendent, Buffalo State Hospital.
MRS. DAVID DIAMOND, visitor, Buffalo State Hospital.
DAVID CORCORAN, M. D., superintendent, Central Islip State Hospital.
GEORGE W. MILLS, M. D., superintendent, Creedmoor State Hospital.
JOHN H. TRAVIS, M. D., first assistant physician, Creedmoor State Hospital.
EARLE V. GRAY, M. D., superintendent, Gowanda State Homeopathic Hospital.
JOHN R. ROSS, M. D., superintendent, Harlem Valley State Hospital.
HARRY A. LABURT, M. D., director of clinical psychiatry, Harlem Valley State Hospital.
EDWARD W. BRIGGS, Jr., M. D., assistant physician, Harlem Valley State Hospital.
RALPH P. FOLSOM, M. D., superintendent, Hudson River State Hospital.
JOSEPH L. SCHWARTZ, visitor, Hudson River State Hospital.
CHARLES S. PARKER, M. D., superintendent, Kings Park State Hospital.
WILLIS E. MERRIMAN, M. D., superintendent, Manhattan State Hospital.

- WM. W. WRIGHT, M. D., superintendent, Marcy State Hospital.
ALBERT V. MOORE, visitor, Marcy State Hospital.
ROBERT WOODMAN, M. D., superintendent, Middletown State Homeopathic Hospital.
WILLIAM J. TIFFANY, M. D., superintendent, Pilgrim State Hospital.
J. L. VAN DEMARK, M. D., superintendent, Rochester State Hospital.
R. E. BLAISDELL, M. D., superintendent, Rockland State Hospital.
MRS. NORMA ZAMBONI, visitor, Rockland State Hospital.
PAUL G. TADDIKEN, M. D., superintendent, St. Lawrence State Hospital.
HARRY J. WORTHING, M. D., superintendent, Willard State Hospital.
MRS. WM. J. EARLEY, visitor, Willard State Hospital.
CLARENCE O. CHENEY, director, Psychiatric Institute and Hospital.
L. E. HINSIE, M. D., assistant director, Psychiatric Institute and Hospital.
HARRY A. STECKEL, M. D., director, Syracuse Psychopathic Hospital.
C. L. VAUX, M. D., superintendent, Newark State School.
GEORGE H. WATSON, D. D. S., visitor, Newark State School.
MICHAEL F. BUCKLEY, visitor, Newark State School.
CHARLES BERNSTEIN, M. D., superintendent, Rome State School.
MRS. ABBIE A. HAMMANN, visitor, Rome State School.
Prof. R. W. FOLEY, visitor, Rome State School.
CHARLES E. ROWE, M. D., superintendent, Syracuse State School.
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WILLIAM H. FREESE, visitor, Wassaic State School.
WM. T. SHANAHAN, M. D., superintendent, Craig Colony.
MRS. CHARLOTTE GLENNY, visitor, Craig Colony.
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GEORGE K. BUTTERFIELD, M. D., medical director, Marshall Sanitarium.
FRED W. KYTE, Delmar, N. Y.
T. E. MCGARR, Albany, N. Y.

The Quarterly Conference of the Department was held in Albany, March 21, 1936, with Commissioner Parsons in the chair.

The CHAIR: Ladies and Gentlemen, I welcome you to Albany to take your important part in this Conference. I hope that the meeting will prove interesting and instructive and that you will consider that you have been repaid for what, because of unfavorable weather conditions, probably has been an arduous journey.

We will now have the first paper on the program, a "Review of Current Legislation of Interest to the Department of Mental Hygiene," presented by Mr. Lewis M. Farrington, which is an unusual feature of the March conference.

Mr. Farrington reads paper.

The CHAIR: The result of Mr. Farrington's considerable labor in analyzing the considered and ill-considered legislative proposals is now before you. His presentation is one which does not lend itself to discussion, but I repeat Mr. Farrington's offer to give you further information about any bill upon which he has commented.

Are there any questions to be asked of Mr. Farrington?

The next paper on the program is "Family Care of the Insane in Scotland" by Dr. H. M. Pollock. Dr. Pollock proposed his paper to take the place of one in course of preparation by Dr. Malzberg, who, for very compelling reasons is not able to present it today.

Dr. POLLOCK: I am sorry Dr. Malzberg could not be here to present his paper on "Trends in Mental Disease in New York State."

The paper I am to present here this morning might be considered a preview of a book on family care that I am preparing with the aid of Dr. Vaux, Dr. Smith and others.

Before commencing my paper I wish to call your attention to the fact that Scotland does not use modern terms in describing its mentally-ill patients and the institutions devoted to their care. Mental patients are called lunatics and the institutions are called asylums. This accounts for the antiquated terminology that I have used in some parts of this paper.

Dr. Pollock reads paper.

The CHAIR: Dr. Pollock's very interesting paper is now before you for discussion.

Dr. CHENEY: This report which Dr. Pollock has presented, as I see it, is essentially from the persons involved in the procedure. Because of his experience in this country, as well as in Scotland, I would be very much interested in knowing what Dr. Henderson thinks of the family care in Scotland. Dr. Henderson has an unusual situation, I think, at Edinburgh. His hospital, by the way, is not called an asylum, but has the name "Morningside," which is rather attractive. He also has patients under state care, as well as private patients.

I did not have an opportunity to discuss with him the so-called family care when I visited him in 1932 and do not know what he thinks about it. I think that before one draws a very definite conclusion regarding the procedure in Scotland it would be helpful to have his viewpoint.

The CHAIR: Do you understand, Dr. Pollock, that the individual patient is maintained either in a district asylum or lunatic wards at the expense of the local community, or at the expense of Scotland?

Dr. POLLOCK: Indigent patients are cared for at the expense of local communities.

Dr. BERNSTEIN: I think it was in 1898 or 1900 that Dr. Stephen Smith made a comprehensive report on his visit to Scotland and the care of the insane. Dr. Smith at one time was commissioner of lunacy in New York State. His report is available in the proceedings of the American Public Health Association. He gives his impression of this Scottish system of family care a third of a century ago. It might be well to compare this with the address we have heard this morning. It is a very voluminous report as he spent some time studying the Scottish system, and commented on its favorable working.

The CHAIR: Do you remember the tenor?

Dr. BERNSTEIN: Yes, very favorably, he commented especially on the satisfaction that not only the family gained but also the individual. He spoke, especially, how the children often looked after the patients, and the patients called members of the family "grandmother" and "grandfather."

Dr. Pollock commented on the lack of social contact and activity on the part of patients in the community. Dr. Stephen Smith at that time stressed the fact that these older people were so happy and contented in those homes. I am sure he had no impressions of stunted social relations and felt that it would be rather undesirable to break the contact in the homes and to divert the individual from the interests which he had developed there. Social diversions were probably detrimental to satisfactory home care.

I think the members of the conference would be interested in reading Dr. Smith's report and it is available through the New York Academy of Medicine.

The CHAIR: Are there other comments? Dr. Vaux, will you speak on the subject of Dr. Pollock's paper?

Dr. VAUX: I think the Scottish report is a very striking endorsement of family care. With the great numbers out and the difficulty of making comparisons I wonder if they do not count a great number of patients who would never reach our institutions. I am surprised at the success they report because of the rather lax way they conduct it. According to the report they place patients in homes in large cities, and under conditions that they admit are far from ideal. It seems to me they do not have a great many of the safeguards that we would feel we would want to throw about the patients in putting them in family care. It is quite an extreme from what we have been familiar with in Gheel. In comparison Gheel seems like just a large institution. It seems to me in conducting a system of family care that it would be much better to have a community like Gheel where we

have the patients so much more closely supervised, and where they can all get together for social contacts and enjoy the freedom of a small village. I certainly think the small community has a great many advantages over this Scottish way of placing the patients anywhere they find a boarding home for them.

We have 80 patients in Walworth. When I say we have only 80 patients we could have a great many more. There are many more applications on file but we have used up all the money and we haven't been able to place any more patients since the last of last July or August, so that our family care has not extended as far as we would like to extend it, but 80 patients is quite a number and supplying them with clothing, shoes, and looking after them involves quite a little business, and we find that is helped very much by a community center. An attendant is on duty all the time and the community center is in the attendant's home. She is always there in case of any trouble to take immediate action and report the difficulty to the social worker if necessary. We have moved patients in and out of there up to a total number of 124, but we have had no serious, untoward incidents; in fact, very few accidents of any kind. If a patient did not get along we brought him back and another patient was taken out. The family did not seem to mind and the new patient would probably get along all right.

We have moved about a dozen from the community and sent them back to county homes. Welfare commissioners ordinarily do not want to take patients back to county homes, but if you can convince them that the patients have lived out of the institution for a time they are more will to accept them.

I do not find that with 80 patients we are having any more difficulty or trouble than when we had 20 or 30, and but few of the difficulties we anticipated. I feel that we can still extend family care.

The CHAIRMAN: Has any other superintendent a project similar to that at Walworth?

Dr. WOODMAN: The nearest we have is the community at Shavertown in Delaware County where we have a number of applications from families desiring to take patients to board. One family now has five patients. The season of the year and the condition of the roads made it impracticable to extend the project during February and March but we hope very soon to make arrangements with a few more families there. I think probably a community plan would prove more successful in winter if a village nearer the hospital could be found, but so far there is no place that is more convenient which seems to be suitable. The people we can interest in the project

around Orange County are scattered and not many in any one community will take patients.

The CHAIRMAN: Is another superintendent able to report a similar project?

Dr. MILLS: Just one point I would like to speak about. In making comparisons between the European countries and New York State, I wish to stress the fact that in the European countries the patients are mostly of one race and speak one language and are mostly of one religion whereas in the metropolitan district it is of course, just the opposite. I recall particularly that one day at Central Islip, women were admitted and 16 did not speak English. They included seven or eight different races. Then too, in the metropolitan area, we have a great many aged; senile, arteriosclerotic. I believe the city should be induced to take care of more of this class and provide a little better care. This would help us a great deal. We had a fair working arrangement with the Kings County Hospital; they would take back any old person we said was no longer psychotic, but unfortunately some of these when they got in the Kings County Hospital would become restless and would have to be sent back to us. Of course, there is nothing there between men's and women's wards and the patients would walk back and forth, and would go through open windows and onto the verandas which were not protected. We finally made an arrangement with the superintendent at Kings Park that he would not send back any patients until we could see them and that worked quite well.

The act which created a domestic relations court in the city of New York in article 2, section 101, provides in general that parents, grandparents, children and grandchildren of the dependent adult are chargeable with his support. Section 102 provides punishment for failure to support and in section 92, subdivision 3, provides the court shall have the power to have persons legally chargeable with the support of his poor relative make payment weekly or at other fixed periods. That is: as I understand the law, the children and grandchildren of our aged patients can be held legally liable to maintain them and the cost apportioned among the various ones liable to the extent of the ability of each. We have at times quoted this law in connection with our effort to make children take their parents home.

The CHAIRMAN: Are there further comments on Dr. Pollock's paper? Do you wish to close the discussion, Dr. Pollock?

Dr. POLLOCK: I was unable to find in the literature any recent comments from American travelers in Scotland who had gone there especially to inspect the family-care system, but back in the eighties William P. Letchworth, whose book most of you have read, spent considerable time studying

the care of the insane in Scotland. His report, as a whole, is very favorable to the family-care system as it existed at that time. A little later, Dr. Henry R. Stedman of Massachusetts visited Scotland and examined family care of patients. His articles on the subject were very helpful in introducing the system in Massachusetts. Then in 1894, Dr. C. Eugene Higgs of Minnesota spent some time in Scotland investigating its system of caring for the insane. In an article published in the *American Journal of Insanity* the following year, he expressed approval of family care as he observed it.

Only three of the institutions for mental patients in Scotland are referred to in the reports as hospitals. Dr. Henderson's institution cares principally for private patients.

In the *Textbook of Psychiatry*, by Henderson and Gillespie, the following reference to family care is made:

"In Scotland, a closely associated form of treatment called the "boarding-out system" has been in use ever since the middle of last century. This system is somewhat different from that which exists in Gheel, owing to the fact that the patients boarded out are not segregated in one colony, but are scattered throughout the country over a wide area. This system is particularly applicable to congenital cases and to harmless, demented patients, but there are certain drawbacks in connection with it, which need not be elaborated here."

Care in a private institution naturally is on a higher basis. It costs much more and in every way it is more to be desired if it can be afforded, but as you all know, most patients are unable to afford care in private institutions.

I wish also to add that in the book I mentioned, Dr. LaBurt is to have a part; also Dr. Thompson of Massachusetts and Dr. Doll of New Jersey.

The CHAIRMAN: Next on the order of business, is the report of the committee on construction, of which Dr. Wm. C. Garvin is the chairman.

Dr. Garvin read the following report of the committee on construction.

REPORT OF COMMITTEE ON CONSTRUCTION

The committee on construction met at the office of the Commissioner of Architecture, Friday, March 20, 1936. There were present Mr. Haugaard, Drs. Tiffany, Vaux, Ross, Mills, Garvin and several members of Mr. Haugaard's staff.

Mr. L. A. Kibbe, research engineer of the Department of Architecture, presented the results of his study of kitchen equipment in the metropolitan hospitals. This study was made in order to ascertain just what kitchen equipment had been installed in the several hospitals, how it stood up and what sort was the most economical. Mr. Kibbe's report was discussed at

length by those present and several minor changes made. Later on the report will be typed and sent to the chairman of the committee on construction, who will forward it to superintendents of hospitals in the Department of Mental Hygiene, so that they will have this information before them in case they wish to make kitchen replacements.

The Commissioner of Architecture has given considerable study to the subject of toilet paper holders for use in water sections. In all future construction the paper containers will be made of stainless steel and be placed in a recess; this will prevent the knocking off of the holders by patients. Sheets instead of rolls of paper will be used in the containers.

The matter of portable and built-in ice boxes was discussed by the committee. The committee recommends that in kitchens serving 300 or less built-in ice boxes be installed; for kitchens serving 300 or more, walk-in ice boxes.

Considerable time was spent in discussing dust chutes in patients' buildings. It was finally agreed that in the dust chambers in the basements sprinkler heads should be installed, controlled by a valve placed just inside the door of the chamber, and a second sprinkler head is to be installed at the top of the dust chute. An alarm will be placed in the janitor's closet on the first floor of buildings where dust chutes have been installed, which will ring in case of fire in the chute or in the basement chamber. The lower end of the chute will be furnished with a metal door, held back and provided with a fusible element so that in case a fire occurs in the dust chamber the fusible element will melt out at a temperature of 165° and close the opening of the dust chute.

The advisability of having recesses in floors at entrance doors, to contain foot mats, was discussed. It was decided that these were advisable and Mr. Haugaard will secure from manufacturers standard sizes of mats so the recess can be made uniform.

Mr. Haugaard advised the committee that he will not be able to use the attractive porcelain glass tile any more in water sections on account of the expense. The cost of this tile has been increasing and is now around \$1.50 a square foot. In the future, colored tile arranged in patterns will be used in water sections.

Provisions for drying wet mattresses were also discussed by the committee. In some of the new buildings space has been provided on the roofs of buildings to dry mattresses but this space is not available during the winter months. Mr. Kibbe will make a study of this matter in order to see whether the most desirable location would be in the basement, where there would be a drying arrangement, the room to be insulated and ventilated located close

to the elevator, or whether such a unit should be placed at the laundry or mattress shop.

In the future all toilet cabinets in employees' homes will be provided with a uniform key.

The arrangements for cafeteria service in the dining rooms in the 1,200-bed disturbed building at Rockland were studied over by the committee and the plans proposed by the State Architect were approved. Mr. Haugaard informed the committee that plans for this building were about completed. He also stated that the final plans for the 800-bed infirmary unit at Brooklyn were completed. Plans are also completed for the 100-bed married couples home, two first assistant staff houses and quarters in building No. 9 for married couples at Rockland State Hospital.

The CHAIRMAN: What do you wish done with the report of Dr. Garvin as chairman of the committee on construction?

It was moved, seconded and carried that the report made by Dr. Garvin be received.

The CHAIRMAN: Dr. Garvin, you are on the program twice. Have you a report for the committee on uniforms?

Dr. GARVIN: I have no report except that there were certain specifications set up in the former report and I feel they should now be adopted by the conference.

Dr. GRAY: I should like to move the adoption of the report of the committee on uniforms with the proviso that the superintendents of the different institutions be allowed to use their discretion in the matter.

Dr. GARVIN: The matter is left to the discretion of each superintendent. Personally, I should like to see the specifications adopted.

Dr. CHENEY: Are they manufactured by only one concern?

Dr. GRAY: So far as I know they could be purchased anywhere but the Sweet-Orr people gave us the best cooperation. It is merely a cotton whipcord material and in our little town we can get it from two different stores, that is, practically the same outfit. The uniform material and style is something one could easily obtain from different firms, I am quite sure.

Dr. VAUX: I would like to offer an amendment, that these uniforms be made standard for the schools where the superintendent desires.

The CHAIRMAN: What do you wish to do with the amendment? Do you accept it, Dr. Gray?

Dr. GRAY: I accept it.

Dr. CHENEY: Have any specifications been drawn? Does any one know what the uniform will be, if adopted? Personally, I don't see the need of adopting this resolution if it is in the discretion of the superintendent. I

think it would be well for the institutions to have more specifications than they have now. I would not be in favor of having it adopted as an order of the department on a resolution.

The CHAIRMAN: Are there further comments? Those in favor of a motion as amended, so signify.

Motion made, seconded and carried to adopt the report of the committee on uniforms with amendment.

The CHAIRMAN: The next on order of business, is reports of other committees.

There appears to be no reports of other business.

Is there anything under the heading of unfinished business?

There is no unfinished business. Is there any new business?

There seems to be no new business to come before the conference.

Prior to the motion for adjournment, I would like to inform the members of the boards that if they desire to have their meeting this afternoon, (there is still time this morning) this room will be available. Last December at the New York conference, the department was asked to provide for a meeting of the members of the boards. That has been done and this room is available for your use now or this afternoon. In order to ascertain the desire of the members of the boards, perhaps those who expect to attend the meeting, will raise their hands.

We are ready now for a motion for adjournment.

Meeting adjourned.

SUMMARY OF LEGISLATION OF 1936 OF INTEREST TO THE DEPARTMENT OF MENTAL HYGIENE*

BY LEWIS M. FARRINGTON,

SECRETARY, STATE DEPARTMENT OF MENTAL HYGIENE

The 1936 session of the Legislature considered a total of 2,186 bills in the Senate and 2,315 bills in the Assembly, a grand total of 4,501 bills. For purposes of comparison, I give the number of bills considered in recent years:

1936	4,501
1935	4,651
1934	4,330
1933	4,427
1932	3,636

The number of bills of interest to the department shows a substantial increase over recent years. I have continued to use the arbitrary classification followed in recent years which seems to meet the requirement in a summary of this character. For convenience in reference the arbitrary classification is as follows:

1. Appropriations.
2. Department legislation.
3. Pension legislation.
4. Civil service.
5. Labor.
6. Examinations and commitment.
7. Contracts, bonds and liens.
8. Correction and penal.
9. Domestic relations.
10. Social welfare.
11. Medical practice.
12. Claims.
13. Unemployment emergency relief.
14. Workmen's compensation.
15. Miscellaneous.

*Presented in preliminary form at Quarterly Conference of Department of Mental Hygiene in Albany, March 21, 1936.

APPROPRIATIONS

The annual appropriation bill has become Chapter 360 of the Laws of 1936.

An important feature of this bill is the provision appropriating \$1,700,000 to provide additional ward service personnel to establish gradually a day of substantially eight hours in the ward service of State hospitals, State schools and Craig Colony.

Another important feature is the continued provision setting aside for each institution, a sum not to exceed \$20,000 for the purpose of establishing a system of family care for patients at rates not exceeding \$4.00 per week.

The bill also carries an item of \$670,000 to provide for salary increases for time service under the provisions of Chapter 686 of the Laws of 1930.

Chapter 465 appropriates bond moneys including the following items for institutions in the department:

Brooklyn State Hospital:

Additional accommodations for patients..... \$640,000

Creedmoor State Hospital:

Additional accommodations for patients and employees 930,000

Rockland State Hospital:

Additional accommodations for patients, employees and staff; service connections; water supply, etc. 3,150,000

Utica State Hospital:

New assembly hall, remodeling main building, etc. 303,000

Supplemental appropriations to provide for estimated deficiencies for maintenance and operation other than personal service in the amount of \$625,000 was made by the regular appropriation bill, Chapter 360.

A supplemental appropriation bill, Chapter No. 875, provides two new positions in the reimbursement bureau of the central office:

1 assistant chief special agent.

1 junior stenographer.

This enlargement in force is required because of increase in the amount of work in this bureau.

Two bills failed of passage: One an appropriation of \$255,000 bond moneys, to provide storehouse, shop buildings and veranda for Buffalo State Hospital; the other an appropriation of \$18,850 to purchase three parcels of land, totaling about 150 acres, for the Marcy State Hospital.

Chapter 15 reappropriates certain unexpended balances for the several institutions.

DEPARTMENT LEGISLATION

I have limited bills discussed under this heading to those sponsored by the department.

A bill amending the Mental Hygiene Law by making it a misdemeanor to bring certain persons into the State for care and treatment at public expense in institutions within the department became Chapter 334.

Another bill amends the Mental Hygiene Law in relation to definition of "resident" that in the case of residents of states with whom there is no reciprocal agreement, the requirements necessary to gain a residence in this State shall not be less than those required for an acquisition of residence in the State from which the person comes. This of course, is a special definition for the purpose of the Mental Hygiene Law and became Chapter 333.

A bill amending subdivision 14, section 34, of the Mental Hygiene Law by increasing from \$300 to \$500, the amount of funds belonging to a patient who has no committee which may be received and disbursed by the superintendent, became Chapter 362.

An important amendment which amounts to a rewriting of Article Six of the Mental Hygiene Law, relating to mental defectives, makes this article conform generally to the provisions relating to the insane, so far as these apply. This became Chapter 563.

A bill authorizing the purchase of a pond on the Beckman property used for colony purposes by the Hudson River State Hospital became Chapter 559; authorized expenditure \$150.

A bill amending the Civil Practice Act in relation to residence requirements for action to annul marriage on the ground of incurable insanity for five years or more by adding a provision requiring that both parties shall have been residents of the State for five years, passed both houses but was vetoed by the Governor.

The following bills sponsored by the department failed of passage:

An amendment to Section 202 of the Mental Hygiene Law exempting licensed institutions from local zoning laws.

An amendment to Section 22 of the Mental Hygiene Law providing no municipal corporation or local authority shall have the power to modify or change or prevent execution of plans for erection, repair or improvement of State institutions, by adding water supply and sewage disposal facilities to the list of such improvements.

PENSION LEGISLATION

As heretofore a considerable number of bills seeking to liberalize or modify the provisions of the retirement law were introduced. Much of this

proposed legislation is open to criticism because the purpose sought to be accomplished is not readily apparent to one not well versed in the provisions of the retirement law. Some of these bills by what seem to be general amendments seek to make special provision for a very small group or even a single individual.

A bill extending the provision for optional retirement at age of 55 to January 1, 1938, on payment of the additional cost became Chapter 423.

A bill amending the section relating to suspension of retirement allowance by those re-entering public service by substituting "any retirement allowance" for "a pension," became Chapter 410.

A minor amendment permitting a member to borrow from "his funds in" the retirement system instead of from the "retirement system" became Chapter 564.

An amendment providing that institutions in the departments of Social Welfare and Health shall be included with other State institutions in the provision that employees must become members on completion of six months of State service became Chapter 567.

A bill requiring the Comptroller to request an opinion from the Attorney-General on any ruling made by the Comptroller in administering funds, when objected to by a person claiming benefits, any determination of the Comptroller to be subject to a review by certiorari, passed both houses of the Legislature but was vetoed by the Governor.

A bill providing that definite reductions in salaries of officers and employees made on account of emergency period shall not be considered a reduction for retirement purposes, became Chapter 429.

A bill providing for discontinued service allowance of a member discontinued from service who has attained the age of 45 and who then is employed and for 20 or more years next prior thereto has been continuously employed as a member or employee of the Legislature of the State of New York became Chapter 507.

A bill amending subdivision 5, section 61, Civil Service Law, relative to service credit, provides this may be granted to those returning within 10 years instead of five years as at present and making other provisions, became Chapter 407.

A bill extending to January 1, 1937, the period for which prior service credit may be received by a person becoming a member of the system, became Chapter 560.

A bill providing that a reduction in salary during the emergency period shall not operate to reduce a pension retirement allowance or privileges and making other provisions, became Chapter 428.

A bill amending the pension law by providing that a person on retirement instead of ceasing to be a member continues as a retired member; and permitting a retired member to designate a beneficiary to receive pension jointly with an applicant, passed both houses but was vetoed by the Governor.

A bill providing for optional retirement of honorably discharged soldiers, sailors, marines and nurses who may elect to retire after 25 years service on an allowance of 1/50 of his final average salary for each year of total service, passed both houses but was vetoed by the Governor.

A bill which would have permitted members of the State Hospital Retirement System to enter the State Employees' Retirement System, up to January 1, 1937, under the same conditions as the option which expired January 1, 1929, failed of passage.

A number of bills making special provisions commented on in previous years were again introduced but failed of passage and are not commented on for lack of space.

CIVIL SERVICE LEGISLATION

This heading includes bills relating to civil service matters other than pension legislation. Conditions of unemployment have still some influence on legislation offered under this heading.

A bill extending the period for preferred lists from four to eight years became Chapter 115. Most of these preferred lists would have expired this year.

A bill adding a section to the Civil Service Law restricting the commission in setting up additional requirements as a condition of taking a civil service examination except for professional and other positions for which such requirements are imposed by statute was vetoed.

I am including here a bill which amends the public officer's law by adding a new section providing that any public officer conducting an examination or hearing at which any person has been compelled or requested or subpoenaed, or otherwise, to hear and give testimony or evidence to permit such person to appear in person or by counsel, the appearance of counsel to be noted on the record and all objections and exceptions taken by counsel to be noted on the record. This bill is an example of efforts sometimes made to obtain by indirect means, legislation that has failed by direct means. This is in effect an amendment to the Civil Service Law so far as it relates to hearings and removal of employees on charges. Vetoed.

A bill amending the Civil Service Law by requiring reinstatement of employees replaced by persons on work relief, became Chapter 386.

A bill amending Section 31 of the Civil Service Law relative to certification of civil service employees removed through no fault of their own became Chapter 562. The important change provides that no other name shall be certified until the preferred list has been exhausted.

A bill amending the Civil Service Law regarding certification of payrolls, simplifies procedure by requiring such certification only twice a year so long as the title and salary remain unchanged. Chapter 692.

A bill amending the civil service law in relation to reinstatement from the preferred list by providing that an employee so reinstated must receive at least the same salary he was receiving at time of separation from the service has become Chapter 525.

A bill amends the Civil Service Law providing that a person in the competitive class demoted in position and whose name is on the preferred list, shall retain his term of eligibility for eight years from the date of demotion and that certification from such list shall be made in the order of the date of original appointment. Chapter 857.

One bill amends the civil service law providing that an appeal for review, alteration or rewriting of an examination shall be taken in not less than 30 nor more than 60 days after the examination. This bill passed both houses but was vetoed by the Governor.

Several bills which failed of passage deserve brief mention. One would prohibit bands or orchestras composed of civil service employees from furnishing music at any function not directly connected with a public department or bureau. A number of similar bills were introduced.

Bills were introduced limiting appointments or promotions in each instance to the one standing highest on the eligible list.

One bill provided automatic salary increments of \$120 per year or until five increments or such part thereof not in excess of the mandatory salary or until a salary of \$3,600 had been reached.

A bill proposing a constitutional amendment limiting veterans preference in civil service appointments to those who were residents of the State when they entered the service and whose disability directly results from actual performance of duty in war and providing further that such preference shall not apply in any promotion, passed the Assembly but failed of passage in the Senate.

A bill to set up for competitive employees a personnel board to act on complaints and to hear charges made by department heads or employees, passed the Assembly but failed in the Senate.

Another bill providing that examinations in the competitive class shall be written, applicant to be graded solely upon such examination, made no progress.

Several bills providing for replacing work relief employees performing duties for which regular employees could be used with such regular employees or persons appointed from preferred or open competitive lists, failed of passage.

A bill requiring payment of a fee for filing application for civil service examination, the fee being graded from one to five dollars, passed the Assembly.

A bill providing all persons in the competitive class shall receive an increase for the fiscal year beginning July 1, 1936, providing the total salary including the increase does not exceed \$2,500, failed of passage.

A bill creating a temporary civil service compensation board, consisting of a senator, an assemblyman and four appointees of the Governor to study salaries paid in public and private employment and to recommend adequate and equitable salary and compensation scales passed the Assembly but failed in the Senate.

There has been much interest in eight-hour-day legislation for State employees, particularly in the institutional service. These bills are commented on under Labor Laws.

Comment is withheld on a number of other interesting bills because of space limitations.

LABOR LAWS

The outstanding feature in this field is the serious and eventually successful effort to establish an eight-hour day for institutional employees. Numerous bills were introduced embodying various features. The one that became a law provides that it shall apply to all persons employed in the ward, cottage, colony and guard service personnel in any hospital, school, prison, reformatory or other institutions within or subject to the jurisdiction, supervision, control or visitation of the Department of Correction, Department of Health, Department of Mental Hygiene, or the Department of Social Welfare, and engaged directly and primarily in the performance of such duties as nursing, guarding or attending inmates, patients, wards or other persons kept or housed in such institutions. Such work is limited to no more than eight hours in any day or 48 hours or more than six days in any calendar week except in emergency. The law becomes effective July 1, 1937, and has become Chapter 716.

Another bill amends the Labor Law regarding sick leave for per diem employees; if in service at least five years such employees may have a sick leave of not more than 30 days in each year, Chapter 301.

A bill amending the Mental Hygiene Law by providing that except where adequate accommodations can be provided in an institution, heads of families must be allowed to live outside and receive an additional \$10 per month. No progress.

EXAMINATIONS, COMMITMENT, ETC.

Chapter 460 amends the Code of Criminal Procedure in several particulars: Section 658 is amended by requiring one of the three commissioners to examine a defendant to be a qualified psychiatrist. Section 659 is amended by striking out reference to "lunatic asylums" and inserting "State hospitals for care and treatment of the criminal insane." Section 661 is amended by substituting the word "hospital" for "asylum." Section 662-A is amended by providing that the fees of commissioners shall not exceed \$300 each.

Chapter 346 amends the Domestic Relations Court Act of New York City, including a provision authorizing the court to commit a mentally defective child "to a suitable institution."

The Mental Hygiene Law is amended by adding a new section 27, creating a Board of Psychiatric Examiners in the Department of Mental Hygiene, and prescribing the qualifications for qualified psychiatrists. A similar measure has been introduced each year for the past few years. Chapter 459.

A bill amending the Civil Practice Act in relation to control of estates of incompetents and other wards of the U. S. Veterans' Administration, failed of passage.

CONTRACTS, BONDS AND LIEN LAWS

Chapter 209 amends the Lien Law by providing for the discharge of a lien for public improvement when six instead of three more months have elapsed since filing notice of lien.

Chapter 534 amends the Lien Law by giving public hospitals and certain private hospitals a lien on rights of action of any person receiving treatment and maintenance on account of personal injuries.

The Lien Law is amended by Chapter 539 in relation to public improvement contracts by repealing Section 27, making the law apply to proceeds of a court of claims judgment and in other particulars.

Chapter 385 amends subdivision 2, Section 21, of the Lien Law by increasing from three months to six months the period for lapsing of lien without renewal or notice of pendency of action.

Chapter 621 amends Section 49-a, Finance Law, by including air-conditioning apparatus, bridges and tunnels among those projects requiring separate specifications.

Measures that failed include: one barring a defaulting contractor from submitting a bid for any public works contract for five years; another bill dispensing with bonds on public works contracts; another favoring use of materials of New York State origin; one requiring the superintendent of standards and purchase to take into account extra costs absorbed by New York State bidders; several bills giving hospitals, physicians and nurses, authority to file liens for care and treatment of injured persons; and one requiring registration with the Secretary of State of persons engaged in the business of plumbing and plumbing equipment, heating, piping and air conditioning, painting, decorating and paperhanging, marble, masonry and materials, electric wiring; gas and electric appliances and equipment, and fixtures.

CORRECTIONS AND PENAL LAW

Many bills have been introduced providing in one form or another for an eight-hour day in the correctional institutions. All failed of passage. An eight-hour day is, however, provided by a bill which became a law and noted under "Labor Law" heading.

Chapter 198 amends the Correction Law by providing a prisoner sent to a hospital because of sickness must be kept in the custody of officials in charge of the jail instead of custody of chief officer of hospital.

Chapter 178 amends the Correction Law by striking out requirement that the superintendent of Napanoch institution must be a physician.

Chapter 418 is an unimportant amendment to Section 400 of the Correction Law by renumbering Section 83-a, Mental Hygiene Law as Section 85, this being the present designation of that section.

Bills which failed of passage would have provided for ascertaining by referendum the opinion of the people of the State on the abolition of capital punishment; providing for a study by the correction department of methods of caring for chronic vagrants, alcoholics and drug addicts at farm colonies or work camps.

DOMESTIC RELATIONS

No bill listed under this heading became a law.* Some effort was made to reduce the five-year period of incurable insanity required by the Domestic Relations Law for annulment of marriage to three years and to four years; another bill added to the causes for absolute divorce adultery, abandonment

*Chapter 346 amends domestic relations court act of New York City by authorizing commitment of a mentally defective child to a *suitable institution*. (See Examinations, Commitments, etc.)

for two or more years, drug addiction, habitual drunkard, afflicted with a loathsome, contagious and incurable disease, convicted of felony or a crime involving moral turpitude; another provided that if a married person died without funds or an estate sufficient to pay for reasonable funeral expenses, the surviving spouse shall be liable for such expense.

SOCIAL WELFARE

The outstanding feature this year is the effort to reduce the age for old age assistance and some effort to raise relief funds by legalizing lotteries.

Chapter 693 provides a reduction from 70 to 65 years to receive old age relief and makes other changes to conform to Federal statutes. At least 10 other bills were introduced intended to accomplish the same purpose, but varying in minor details.

Chapter 369 amends Section 56 of the Public Welfare Law by including the Federal government in list of governmental units from which relief is not to be received in establishing a legal settlement.

A bill amending the Public Welfare Law generally by reorganizing the State Department of Social Welfare and transferring thereto functions of the T. E. R. A., became Chapter 873.

Chapter 426 amends Section 125, Public Welfare Law, regarding liability of relatives to support, by providing that no liability for support shall be imposed upon a minor child or a grandchild, nor shall money or property of such minor or grandchild be subject to the burden of support of a parent or grandparent unless the court expressly finds that the money and property of a minor are in excess of his reasonable requirements.

Chapter 463 amends Section 128 of the Public Welfare Law by adding a provision that no right of action shall accrue by reason of relief granted an infant, unless the infant was possessed of money and property in excess of his requirements as described in Section 125, as amended by Chapter 426 above noted.

Chapter 571 amends Section 130, Public Welfare Law, by providing that upon the death of a person receiving relief or his receiving institutional care, a mortgage received on behalf of maintaining the person at public expense may be foreclosed.

A bill establishing a temporary commission to study causes and extent of juvenile delinquency and appropriating \$15,000 made no progress.

A bill amending the Public Welfare Law providing that absence from the State, county or public welfare district solely by reason of illness, shall be deemed residence for purpose of old age relief, made no progress.

A bill providing for old age security on a contributory basis, annuity \$50 per month at age of 65, made no progress.

A bill amending Education Law and Children's Court Act by providing that jurisdiction of children's court shall include children under the age of 21 years who are mental defectives, made no progress.

A bill amending the Public Welfare Law and other statutes to provide for full acceptance of Federal funds for aid for dependent children, assistance to blind, for maternal and child welfare services, etc. The Governor strongly urged this legislation which failed of passage.

(For progress in compensation for silicosis and other dust diseases, see Workmen's Compensation.)

MEDICAL PRACTICE

Chapter 139 amends Medical Practice Act by striking out provision in Section 354 of Civil Practice Act that testimony of physicians and nurses attached to any hospital regarding confidential information acquired at an institution shall be before a referee.

Chapter 237 amends Section 25 of the Public Health Law in relation to reports of infections, etc., under certain conditions including those in State institutions.

Chapter 498 amends Public Welfare Law by redefining wholesaler as a person who supplies other than consumers with narcotic drugs or preparations which he, himself, has not produced or prepared.

Chapter 604 amends the Domestic Relations Law relating to blood grouping tests by authorizing the court to require the mother, her children and the defendant to submit to such tests.

Chapter 440 amends the Civil Practice Act by giving the court greater powers in ordering and interpreting results of blood grouping tests.

One bill amends the Education Law in reference to the practice of podiatry. The bill passed in much amended form. Chapter 791.

Chapter 741 amends Section 412, Civil Practice Act, relating to production of hospital records by including the records of any department or bureau of a municipal corporation.

Among the bills that failed of passage were the following: Including chiropractic among professions to be regulated and licensed; establishing a division of narcotic control in the State Department of Health and appropriating \$25,000; permitting endorsement of license to practice medicine to graduates of colleges in foreign state or country under certain conditions; granting authority to revoke license to practice medicine of one who advertises by means of hand bills, posters, circular letters, stereopticon slides,

motion pictures, radio or newspapers; and several bills amending the law relating to the grouping, marking, process of manufacturing and testing of clinical thermometers.

CLAIMS

A considerable number of claim bills were introduced and passed: One covers claims against the State on account of a patient in Letchworth Village. Vetoed.

Claims against Rome State School by an employee who alleged infection with undulant fever. Vetoed.

Claim against Marcy State Hospital on account of injury sustained by contact with a wire across the highway. Chapter 922.

Amending the Court of Claims Act regarding waiver of the State of immunity by striking out provision that claim must be filed within 60 days for injury or within two years after happening of event which caused the injury. Vetoed.

Claim against Newark State School on account of injuries to a patient. Vetoed.

Claim against St. Lawrence State Hospital on account of death of a patient. Chapter 923.

Claim against Marshall Sanitarium and Department of Mental Hygiene on account of the suicide of a patient. Vetoed.

A bill amending the Court of Claims Act by empowering the court to determine claims caused by negligence of any State officer or employee, and which are barred by lapse of time, to time of filing claims and to contents thereof. Chapter 775.

The following claim bills failed of passage: Claim account of crime of patient now at Matteawan; claim of former patient of the Kings Park State Hospital, of alleged improper detention.

UNEMPLOYMENT EMERGENCY RELIEF

Chapter 13 extends to April 1, 1936, the T. E. R. A. organization.

Chapter 210 extends emergency period to June 30, 1937.

Chapter 117 amends the Labor Law in relation to unemployment insurance as added by Chapter 468 of the Laws of 1935. The most important change exempts religious, charitable and other organizations from its provisions.

Chapter 553 authorizes creation of a State debt for \$30,000,000 subject to authorization by the voters at the November, 1936 general election, to be available for temporary emergency relief from November 15, 1936 to February 15, 1938.

Chapter 554 appropriates \$15,000,000 of the above bond issue if approved by the voters.

Chapter 552 appropriates the balance of the \$35,000,000 bond issue approved in 1935 for temporary emergency relief.

Chapter 822 amends the T. E. R. A. Law by providing any local emergency relief bureau may appoint employees in accordance with the Civil Service Law from lists established as a result of examinations held subsequent to the time the amended law takes effect.

Among the bills that failed of passage were: One appropriating \$50,000 to make a comprehensive study and analysis of unemployment and unemployment relief. A somewhat similar bill carried an appropriation of \$25,000.

Some effort was made to limit relief to citizens and to residents and to permit ownership of a life insurance policy of \$500 or less.

There was also some effort to replace T. E. R. A. workers with persons appointed from competitive lists.

WORKMEN'S COMPENSATION

Chapter 887 adds new article 4-a Workmen's Compensation Law, new Section 222-a, Labor Law, for compensation for silicosis and certain injuries to the respiratory tract resulting from inhalation of harmful dust and for prevention of dust hazard in public works.

Chapter 889 makes an appropriation for \$100,000 to carry out the provisions of the above.

Bills were introduced to allow compensation from date of disability (present provision seven days after disability); also to include silicosis and certain injuries to the respiratory tract and for prevention of dust hazard in public works.

A bill empowering the industrial commissioner to establish a schedule of minimum charges and fees for medical treatment and care made no progress.

MISCELLANEOUS

Chapter 185 provides that State or city employees may perform military or naval duty without jeopardy to employment, vacation allowance or holiday privilege.

Chapter 304 amends the Civil Practice Act relative to procedure for garnisheeing the salaries and wages of State officers and employees. It is required to be presented to the State comptroller at the Albany office and certain other changes are made.

A bill amending the public officers law by providing veterans must be given leave of absence with pay on Armistice Day as well as Memorial Day became Chapter 679.

Chapter 753 provides that the new State Tuberculosis Hospital at Oneonta shall be named Homer Folks Tuberculosis Hospital in recognition of Mr. Folks' long service in the cause of social welfare.

Chapter 690 amends the Civil Practice Act in relation to disposition of proceeds of estates of infants or incompetents by increasing from \$150 to \$300 the maximum amount which the court may order paid to relative or other competent person for use and benefit of the incompetent.

Chapter 314 amends the Civil Practice Act regarding annual inventories and accounts of committees by providing the referee may be required by the presiding justice to examine the committee under oath and report in writing.

Chapter 494 amends the law relating to the surrender of the lease of Ward's Island by striking out the provision definitely locating a sewer across Ward's Island and adds authority to cross to Manhattan Island, Little Hell Gate to Randall's Island and Bronx Kill to the borough of Bronx.

Chapter 584 amends the Indian Law in relation to payment of annuities to incompetent Indians. It provides that payments shall be made to the attorney or agent of the tribe as trustee to be expended for the benefit of the incompetent as will best promote his welfare except that if an incompetent is a member of the Cayuga Tribe, it shall be made to the State Department of Social Welfare for the same purpose.

Chapter 616 amends Section 10 of the State Finance Law by confirming and amplifying the comptroller's authority and placing custody of funds in the commissioner of taxation and finance, and modifying the provision regarding security of such deposits.

Chapter 839 authorizes water power and control commissioner to investigate present and prospective needs for water on Long Island, local resources, etc., and appropriates \$25,000.

Chapter 555 amends Triborough Bridge Authority Law now authorizing triborough bridge across Ward's Island by including a new project covering a bridge across the East River from a point, at or near Whitestone in the Borough of Queens to the Borough of Bronx.

Chapter 550 continues the temporary commission created in 1930 to investigate and collect facts relating to the administration of justice in the State to March 1, 1937.

Chapter 551 appropriates \$15,000 for the above temporary commission.

A bill amending the Civil Practice Act regarding examination of accounts of committees by conferring more power on the referees and requiring written report to the court was vetoed.

Among bills under this heading that failed of passage were the following:

Creation of a commission to collect facts with relation to investment of trust funds of infants and incompetents and appropriating \$25,000.

Authorizing newspaper proprietor or editor to refuse to disclose source of communications.

Reducing time for removal from Ward's Island from 1943 to January 1, 1939.

Establishing Good Friday as a legal holiday.

Providing that Attorney-General shall be an appointive officer.

Fixing compensation of jurors in committee proceedings at \$4.00 per day.

Establishing a division of food in the Department of Health and appropriating \$50,000. Division to investigate, experiment, establish and fix standard for menus in hotels and in institutions supported by public funds.

Proposed ratification of child labor amendment to United States constitution.

Providing every motor vehicle owned by the State must have name of State and department painted on both sides.

Several bills relating to payment of statutory increases of salaries including repeal of law temporarily suspending automatic increases.

Prohibiting use of imitation butter and cheese in any public or private institution supported in whole or in part by public funds and prohibiting their distribution in relief work.

Prohibiting solicitation of business by undertakers or embalmers excepting by card announcement in newspapers, sign upon place of business and insertion of name and address in classified section of telephone directory.

Requiring food handlers to obtain a certificate of duly licensed physician certifying freedom from contagious or infectious diseases.

Transferring all powers and duties of Health Department regarding milk and cream to Department of Agriculture and Markets.

Designating State Department of Health as agency for administering Federal aid moneys for maternal and child health service.

Designating Department of Social Welfare as agency for expending Federal aid moneys for child welfare services.

Prohibiting interment or cremation on Sunday unless necessary as a health precaution.

Creating a temporary commission of 12 members to investigate law as to legal investments for trust funds for incompetents.

In general comments have been restricted to bills which reached the Governor and those that became law or were vetoed.

In a few instances brief comments are made on bills which failed of passage. As this latter group is always larger than the group which becomes law, this summary comments on substantially less than one-half of all bills which it was necessary to classify and study for purposes of this review.

STATISTICAL REVIEW OF OCCUPATIONAL THERAPY IN THE NEW YORK CIVIL STATE HOSPITALS, 1935

BY HORATIO M. POLLOCK AND GERTRUDE M. MACK

That occupational therapy is maintaining its place as an approved treatment procedure in the civil State hospitals is clearly indicated by the statistics herein presented.

Much credit is due to Mrs. Eleanor C. Slagle, director of the bureau of occupational therapy, and to James E. Simpson, supervisor of physical training, for their organizing ability, and their stimulating influence on the workers in the occupational therapy departments of the several institutions.

Notwithstanding the economic depression the trend in occupational therapy in the State institutions continues upward. Marked expansion during the past three years could not be expected and has not occurred but significant gains have been made.

The personnel of occupational therapy departments in State hospitals and Newark State School on June 30, 1935, is shown in the following tabulation:

PERSONNEL OF OCCUPATIONAL THERAPY DEPARTMENTS IN STATE HOSPITALS AND NEWARK STATE SCHOOL

	Males	Females	Total
Chief occupational therapists	1	20	21
Assistant chief occupational therapists.....	..	1	1
Occupational therapists	6	44	50
Physical instructors	5	4	9
Special attendants in occupational therapy..	31	58	89
Special attendants in physical training....	24	18	42
Other employees in occupational therapy..	17	48	65
Other employees in physical training	2	2	4
	86	195	281

MOVEMENT OF PATIENTS

The movement of occupational therapy patients during the year in the several civil State hospitals is shown by Table 1. Only patients regularly treated in occupational therapy or physical instruction classes are included in the table. The magnitude of the work carried on is indicated by the totals; these show that at the beginning of the year 20,310 patients were receiving occupational treatment; 20,866 were admitted to treatment during the year; 20,728 left treatment; and 20,448 were under treatment at the end of the year. The net increase of patients under treatment was 138.

TABLE 1. MOVEMENT OF OCCUPATIONAL THERAPY PATIENTS IN THE STATE HOSPITALS DURING THE YEAR ENDED JUNE 30, 1935

State Hospitals	Under treatment, July 1, 1934			Admitted to treat- ment during year			Total under treat- ment during year			Left treatment during year			Under treatment, June 30, 1935			Receiving physical training only, June 30, 1935		
	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total
Binghamton	551	581	1,132	370	285	655	921	866	1,787	382	332	714	539	534	1,073	355	253	608
Brooklyn	220	229	449	590	823	1,413	810	1,032	1,862	644	848	1,492	166	204	370	48	63	111
Buffalo	648	985	1,633	489	591	1,080	1,137	1,576	2,713	538	747	1,285	599	859	1,428	451	423	874
Central Islip	487	1,031	1,518	980	914	1,894	1,467	1,945	3,412	1,039	871	1,910	428	1,074	1,502	172	804	776
Creedmoor	797	1,160	1,957	1,344	2,338	3,682	2,141	3,498	5,639	1,196	2,256	3,452	945	1,242	2,187	656	650	1,306
Gowanda	163	235	398	230	251	481	393	486	879	193	251	444	200	285	435	114	81	195
Harlem Valley	270	306	576	104	114	218	374	420	794	63	79	142	311	341	652	109	206	405
Hudson River	999	1,128	2,127	674	510	1,184	1,673	1,638	3,311	573	592	1,165	1,100	1,046	2,146	902	530	1,432
Kings Park	913	425	1,338	1,021	593	1,614	1,934	1,018	2,952	1,127	829	1,956	807	189	996	112	114	226
Manhattan	245	421	666	603	678	1,281	848	1,099	1,947	656	733	1,398	192	366	558	75	24	99
Marcy	764	1,068	1,832	91	281	372	855	1,349	2,204	64	253	317	791	1,096	1,887	690	601	1,291
Middletown	253	452	705	191	179	370	444	631	1,075	158	195	353	286	436	722	203	184	387
Pilgrim	582	1,387	1,969	1,045	540	1,585	1,627	1,927	3,554	1,061	293	1,354	566	1,634	2,200	451	1,164	1,615
Psychiatric Inst. and Hosp.	49	63	112	175	148	323	224	211	435	178	156	334	46	55	101	..	..	..
Rochester	372	434	806	268	357	625	640	791	1,431	227	379	606	413	412	825	315	192	507
Rockland	523	538	1,061	719	1,192	1,911	1,242	1,730	2,972	596	1,173	1,769	646	557	1,203	461	397	858
St. Lawrence	167	599	766	180	256	436	347	855	1,202	177	207	384	170	648	818	158	191	349
Syracuse Psy. Hosp.	20	20	40	292	195	487	312	215	527	295	191	486	17	24	41	..	..	..
Utica	299	437	736	161	387	548	460	824	1,284	158	407	565	302	417	719	270	184	454
Willard	144	345	489	347	360	707	491	705	1,196	277	384	611	214	371	585	194	127	321
Total	8,466	11,844	20,310	9,874	10,922	20,866	18,340	22,836	41,176	9,602	11,126	20,728	8,738	11,710	20,448	5,826	5,968	11,614

Patients receiving physical training only at the end of the year numbered 11,814, an increase of 654 during the year. The several hospitals differ widely in facilities for occupational treatment, and the gains made during the year are unevenly distributed. It is noted that an occupational therapy department with more than 2,000 under treatment is found in three of the hospitals.

GROWTH

The growth of occupational treatment in the State hospital system since 1933 is shown year by year in Table 2. The general trend both absolutely and relatively is gradually rising, although the percentage of patients under treatment declined slightly in 1935. The percentage has more than doubled since 1923. The females outnumber the males in physical training classes as well as in other branches of occupational therapy. The difference is partly accounted for by the greater employment of male patients in hospital industries, and partly by the lack of development of occupational therapy for males in several hospitals.

TABLE 2. PATIENTS IN THE OCCUPATIONAL THERAPY DEPARTMENTS OF THE NEW YORK CIVIL STATE HOSPITALS AT CLOSE OF FISCAL YEARS, 1923-1935, INCLUSIVE

Date	Number in occupational therapy departments			Number in occupational therapy departments per 100 patients in the State hospitals		
	Males	Females	Total	Males	Females	Total
June 30, 1923	*	*	5,340	*	*	16.2
June 30, 1924	*	*	7,339	*	*	18.8
June 30, 1925	*	*	9,849	*	*	24.4
June 30, 1926	5,146	6,923	12,069	26.4	31.7	29.2
June 30, 1927	5,134	7,839	12,973	25.3	34.8	30.3
June 30, 1928	5,673	7,372	13,045	26.9	31.5	29.8
June 30, 1929	5,533	7,499	13,032	25.8	31.4	28.8
June 30, 1930	5,534	8,040	13,574	24.5	32.5	28.7
June 30, 1931	5,731	8,455	14,186	24.1	32.9	28.7
June 30, 1932	7,471	9,782	17,253	29.3	36.3	32.9
June 30, 1933	8,801	11,143	19,944	32.7	39.3	36.1
June 30, 1934	8,466	11,844	20,310	30.3	40.4	35.4
June 30, 1935	8,738	11,710	20,448	29.9	38.2	34.2

*Data not available.

The number of patients under treatment in occupational classes, exclusive of physical training at the end of each year since 1927 is shown in Table 3. A noteworthy advance in rate of patients under treatment occurred in 1933. This was followed by a significant decline in 1934. Both sexes shared in the decline.

TABLE 3. PATIENTS IN THE OCCUPATIONAL THERAPY DEPARTMENTS OF THE NEW YORK CIVIL STATE HOSPITALS (EXCLUSIVE OF THOSE IN RECEIPT OF PHYSICAL TRAINING ONLY)

Date	Number			Number per 100 patients in the State hospitals		
	Males	Females	Total	Males	Females	Total
June 30, 1927	2,098	4,714	6,812	10.3	21.0	15.9
June 30, 1928	2,421	4,658	7,079	11.5	19.9	15.9
June 30, 1929	2,481	4,373	6,854	11.6	18.3	15.1
June 30, 1930	2,761	4,927	7,688	12.2	19.9	16.2
June 30, 1931	2,744	4,974	7,718	11.6	19.4	15.6
June 30, 1932	3,147	5,701	8,848	12.3	21.2	16.9
June 30, 1933	3,902	6,395	10,297	14.5	22.6	18.6
June 30, 1934	3,209	5,941	9,150	11.5	20.2	16.0
June 30, 1935	2,912	5,722	8,634	10.0	19.4	14.4

Table 4 shows for each hospital the total under treatment in occupational therapy classes, other than physical training during the year ended June 30, 1935. The grand total, 18,029, is less than that of the previous year by 113. Increases in treated patients are reported by Brooklyn, Buffalo, Gowanda, Manhattan, Marcy, Pilgrim, Rochester and Willard State hospitals. On the other hand, a decline is noted in several hospitals. In the system as a whole the percentage of patients treated decreased from 24.3 in 1934 to 23.1 in 1935. The percentage of males decreased from 19.3 to 18.6 and that of the females from 29.1 to 27.6. High rates of treated cases are reported by Brooklyn, Buffalo, Creedmoor, Gowanda, Kings Park, St. Lawrence and Utica State hospitals. The Psychiatric Institute and Hospital gave occupational treatment to 61.0 per cent of its patients, and the Syracuse Psychopathic Hospital, to 69.5 per cent. Except in the latter institution the percentage of males treated was lower than that of the females.

Exceptionally low percentages of males treated are reported by Harlem Valley, Middletown, Pilgrim and Willard State Hospitals.

CASES TREATED DURING THE YEAR

TABLE 4. PATIENTS* TREATED IN OCCUPATIONAL THERAPY DEPARTMENTS OF THE NEW YORK CIVIL STATE HOSPITALS DURING THE FISCAL YEAR ENDED JUNE 30, 1935

State hospitals	Number			Rate per 100 patients under care in the State hospitals during year		
	Males	Females	Total	Males	Females	Total
Binghamton	353	363	716	17.5	23.7	20.2
Brooklyn	580	662	1,242	29.4	30.0	29.7
Buffalo	358	624	982	23.5	33.4	28.9
Central Islip	759	1,007	1,766	15.8	24.0	19.7
Croedmoor	530	778	1,308	36.0	39.0	37.7
Gowanda	177	273	450	17.5	37.8	26.0
Harlem Valley	112	135	247	6.9	7.1	7.0
Hudson River	342	629	971	13.9	22.4	18.4
Kings Park	1,216	822	2,038	34.9	35.8	35.3
Manhattan	501	973	1,474	15.8	25.7	21.2
Marcy	91	454	545	4.9	32.7	16.9
Middletown	116	314	430	7.1	16.3	12.1
Pilgrim	224	631	855	8.4	20.6	14.9
Psychiatric Inst. and Hos.	169	162	331	55.4	68.1	61.0
Rochester	199	283	482	12.6	16.7	14.7
Rockland	515	613	1,128	17.4	20.4	18.9
St. Lawrence	471	1,007	1,478	37.7	72.3	55.9
Syracuse Psycho. Hos....	288	169	457	76.0	60.6	69.5
Utica	156	477	633	14.0	40.7	27.7
Willard	96	400	496	5.9	24.6	15.2
Total	7,253	10,776	18,029	18.6	27.6	23.1

*Exclusive of those receiving physical training only.

Trends in total patients treated are shown by sex in Table 5. Slight declines in numbers and percentages of cases treated are shown for 1935. Although the percentage of females treated is constantly higher than those of males, the trends in the two sexes are practically the same.

TABLE 5. PATIENTS* TREATED IN THE OCCUPATIONAL THERAPY DEPARTMENTS OF THE NEW YORK CIVIL STATE HOSPITALS DURING THE FISCAL YEARS, 1926-1935

Year	Number			Rate per 100 patients under care in the State hospitals during year		
	Males	Females	Total	Males	Females	Total
1926	2,817	5,867	8,684	11.1	21.2	16.4
1927	3,239	6,723	9,962	12.3	23.9	18.3
1928	3,814	7,210	11,024	13.7	24.6	19.3
1929	4,504	7,587	12,091	15.6	25.0	20.4
1930	4,834	8,263	13,097	16.0	26.2	21.2
1931	5,293	8,658	13,951	16.8	26.6	21.8
1932	5,900	9,647	15,547	17.7	28.3	23.1
1933	6,338	9,945	16,283	17.9	27.7	22.8
1934	7,269	10,873	18,142	19.5	29.1	24.3
1935	7,253	10,776	18,029	18.6	27.6	23.1

*Exclusive of those receiving physical training only.

MENTAL CLASSIFICATION

The mental classification of the patients treated during the fiscal year is shown in Table 6. Dementia præcox patients constitute by far the largest group treated although several other psychoses are represented by larger percentages in the table. Groups having percentages of treated patients considerably above the average include psychoses with convulsive disorders, involutional psychoses, manic-depressive psychoses, psychoneuroses, with psychopathic personality, with organic brain and nervous diseases, without psychoses, and primary behavior disorders. Especially noteworthy are the high percentages of manic-depressive, psychoneurotic and psychopathic women patients treated. Attention is also called to the fact that the percentage of patients with organic psychoses in the occupational classes fall but slightly below the general average. The percentages treated in the various groups vary but little from those of the previous year.

AGE OF PATIENTS TREATED

That advanced age is not a bar to occupational treatment is clearly shown by Tables 7 and 8. No less than 1,950 patients above the age of 60 were treated in 1935. Treatment is adapted to the interests as well as to the physical and mental condition of the patients in the several age groups. The percentages of males in the younger age groups are larger than those of the females; in the middle age group the reverse distribution is found. However, the differences are not large.

TABLE 6. MENTAL DISORDERS OF PATIENTS TREATED IN OCCUPATIONAL THERAPY DEPARTMENTS OF THE NEW YORK CIVIL STATE HOSPITALS DURING THE FISCAL YEAR ENDED JUNE 30, 1935

Mental disorders	Number			Rate per 100 patients in the State hospitals		
	Males	Females	Total	Males	Females	Total
General paresis	708	252	960	21.2	25.6	22.2
With other syphilis of central nervous system....	62	41	103	19.1	21.9	20.1
With epidemic encephalitis	28	23	51	13.9	16.7	15.0
With other infectious diseases	5	11	16	*	*	13.2
Alcoholic	451	181	632	17.2	25.3	19.0
Due to drugs or other exogenous poisons	9	19	28	*	*	25.0
Traumatic	85	6	91	20.7	*	18.9
With cerebral arteriosclerosis	441	478	919	13.4	17.4	15.2
With other disturbances of circulation	7	5	12	*	*	8.3
With convulsive disorders	188	212	400	22.5	30.1	26.0
Senile	120	229	349	11.1	12.4	11.9
Involuntional	171	487	658	28.4	37.3	34.5
Due to other metabolic, etc., diseases	10	57	67	9.8	32.2	24.0
Due to new growth	4	3	7	*	*	*
With organic changes of nervous system	102	71	173	35.2	33.3	34.4
Psychoneuroses	148	287	435	35.9	52.4	45.3
Manic-depressive	713	1,922	2,635	25.9	37.4	33.4
Dementia præcox	3,375	5,495	8,870	17.6	26.6	22.3
Paranoia and paranoid conditions	64	193	257	13.1	23.8	19.7
With psychopathic personality	169	224	393	27.0	38.7	32.6
With mental deficiency..	199	437	636	16.7	32.6	25.1
Undiagnosed	88	101	189	26.3	34.4	30.0
Without psychosis	100	41	141	70.9	*	59.2
Primary behavior disorders	6	1	7	*	*	*
Total	7,253	10,776	18,029	18.8	27.8	23.3

*Rate was not computed when base was less than 100.

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TABLE 7. AGES OF PATIENTS TREATED IN OCCUPATIONAL THERAPY DEPARTMENTS OF THE NEW YORK CIVIL STATE HOSPITALS, CLASSIFIED ACCORDING TO MENTAL DISORDERS, YEAR ENDED JUNE 30, 1935

Mental disorders	Total		T.	Under 15 years		15 to 19 years		20 to 24 years		25 to 29 years	
	M.	F.		M.	F.	M.	F.	M.	F.	M.	F.
General paresis	708	252	960	1	6	12	4	10	8	18	18
With other syphilis of central nervous system	62	41	103	1	..	3	..	..	..	7	8
With epidemic encephalitis	28	23	51	2	2	5	4	6	6	2	4
With other infectious diseases	5	11	16	1	..	..	..	..	1	1	3
Alcoholic	451	181	632	..	..	..	1	6	4	25	10
Due to drugs or other exogenous poisons	9	19	28	..	..	1	..	1	..	2	2
Traumatic	85	6	91	1	..	3	..	5	..	4	1
With cerebral arteriosclerosis	441	478	919	..	..	..	..	..	..	..	..
With other disturbances of circulation	7	5	12	..	..	..	..	2	..	3	1
With convulsive disorders	188	212	400	4	5	17	15	22	34	41	29
Senile	120	229	349	..	..	..	..	..	..	..	..
Involutional	171	487	658	..	..	..	..	..	..	..	..
Due to other metabolic, etc., diseases..	10	57	67	..	..	..	2	..	7	1	8
Due to new growth	4	3	7	..	..	..	..	..	..	..	..
With organic changes of nervous system	102	71	173	19	18	6	6	11	13	9	6
Psychoneuroses	148	287	435	1	2	7	17	24	21	24	35
Manic-depressive	713	1,922	2,635	2	6	35	67	66	144	73	231
Dementia præcox	3,375	5,495	8,870	20	19	243	182	544	505	592	708
Paranoia and paranoid conditions....	64	193	257	..	..	..	1	..	2	3	3
With psychopathic personality	169	224	393	18	7	26	16	18	30	25	28
With mental deficiency	199	437	636	5	13	26	35	24	47	30	62
Undiagnosed	88	101	189	1	..	9	8	14	18	13	7
Without psychosis	100	41	141	11	6	12	4	10	9	10	4
Primary behavior disorders	6	1	7	4	1	2	..	..	..	..	..
Total	7,253	10,776	18,029	91	85	407	362	763	849	883	1,188

TABLE 7. AGES OF PATIENTS TREATED IN OCCUPATIONAL THERAPY DEPARTMENTS OF THE
NEW YORK CIVIL STATE HOSPITALS, CLASSIFIED ACCORDING TO MENTAL DISORDERS,
YEAR ENDED JUNE 30, 1935—(CONCLUDED)

30 to 34 years		35 to 39 years		40 to 44 years		45 to 49 years		50 to 54 years		55 to 59 years		60 to 64 years		65 to 69 years		70 years and over		Un- tained	
M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
58	28	152	39	154	49	135	36	77	39	41	10	25	10	12	..	4	..	9	5
1	4	9	3	8	7	10	8	6	6	9	3	3	..	3	..	2	1	..	1
4	2	4	1	1	3	3	1	..	..	..	..	..	..	..	..	..	..	1	..
..	..	..	3	..	1	..	1	2	1	..	..	..	1	1	..	..	..	..	..
37	11	66	28	64	34	71	23	64	20	45	20	35	17	11	7	16	3	11	3
..	3	1	2	2	4	..	2	..	1	2	2	..	3	..	..	..	..	..	..
7	..	12	..	6	1	11	2	12	..	5	..	10	1	5	1	2	..	2	..
..	..	..	2	7	8	9	27	49	61	71	89	107	96	97	86	100	106	1	3
..	1	..	1	..	1	..	1	..	..	2	..	..	..	..	..	..	..	..	..
18	29	15	32	28	28	17	16	9	9	11	3	4	8	2	2	..	1	..	1
..	..	..	..	..	..	..	..	4	3	5	14	14	28	28	56	68	127	1	1
..	4	3	15	11	66	26	132	52	123	40	86	28	34	4	18	4	8	3	1
1	3	1	6	3	8	2	8	..	5	2	4	..	4	..	1	..	1	..	..
2	..	1	1	1	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..
7	4	13	5	10	3	10	8	7	7	3	1	5	..	..	..	..	..	2	..
23	52	16	40	17	38	15	27	8	23	7	17	4	5	1	5	..	2	1	3
70	260	72	290	99	264	88	235	73	142	67	110	31	81	20	45	11	25	6	22
508	792	509	917	384	758	226	583	146	418	89	258	45	155	19	90	17	54	33	56
3	11	5	9	11	26	10	22	11	28	9	35	2	28	4	14	4	12	2	2
13	28	19	33	20	30	12	16	4	17	7	7	2	8	2	3	1	..	2	1
24	52	25	71	21	54	7	40	18	26	8	18	8	12	3	4	2	1	..	2
11	12	10	14	9	7	6	11	3	9	5	9	3	4	4	2	..	..	..	..
13	2	10	5	11	3	7	4	4	..	3	1	2	..	2	..	1	2	4	1
..
800	1,298	943	1,517	867	1,394	665	1,204	547	938	431	687	328	495	218	334	232	343	78	102

TABLE 8. AGE DISTRIBUTION OF PATIENTS IN OCCUPATIONAL THERAPY CLASSES AT
END OF YEAR

Age group, years	Number			Per cent		
	Males	Females	Total	Males	Females	Total
Under 15	91	85	176	1.3	0.8	1.0
15 to 19	407	362	769	5.6	3.4	4.3
20 to 24	763	849	1,612	10.5	7.9	8.9
25 to 29	883	1,168	2,051	12.2	10.8	11.4
30 to 34	800	1,298	2,098	11.0	12.0	11.6
35 to 39	943	1,517	2,460	13.0	14.1	13.6
40 to 44	867	1,394	2,261	12.0	12.9	12.5
45 to 49	665	1,204	1,869	9.2	11.2	10.4
50 to 54	547	938	1,485	7.5	8.7	8.2
55 to 59	431	687	1,118	5.9	6.4	6.2
60 to 64	328	495	823	4.5	4.6	4.6
65 to 69	218	334	552	3.0	3.1	3.1
70 and over	232	343	575	3.2	3.2	3.2
Unascertained	78	102	180	1.1	0.9	1.0
Total	7,253	10,776	18,029	100.0	100.0	100.0

CONDITION OF PATIENTS TREATED

The condition of each treated patient at end of year or at time of leaving treatment is determined by the hospital physicians, and is reported on the statistical schedules submitted by the several hospitals to the statistical bureau. The combined results are shown in Table 9. It is recognized that many factors operate together to affect the patient's condition for good or ill. Occupational therapy, although one of the most important of such factors, cannot be separated from the others. It is believed, however, that a special yearly check-up of the condition of treated patients serves a useful purpose.

The small number of recoveries reported is due in part to the fact that many patients leave occupational classes to go on parole or into hospital industries before reaching a completely recovered state.

TABLE 9. REPORTED CONDITION* OF PATIENTS TREATED IN OCCUPATIONAL THERAPY DEPARTMENTS OF THE NEW YORK CIVIL STATE HOSPITALS DURING THE YEAR ENDED JUNE 30, 1935

State hospitals	Total			Recovered			Improved			Unimproved			Died			Unreported		
	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total
Binghamton	353	363	716	23	28	51	181	126	307	131	194	325	16	9	25	2	6	8
Brooklyn	580	662	1,242	6	8	14	323	232	555	206	384	590	24	14	38	21	24	45
Buffalo	358	624	982	..	2	2	241	380	621	111	233	344	6	9	15	..	..	..
Central Islip	759	1,007	1,766	73	21	94	324	324	648	361	655	1,016	1	4	5	..	3	3
Creedmoor	530	778	1,308	..	10	10	63	286	349	456	472	928	11	10	21	..	..	..
Gowanda	177	278	455	9	..	9	87	117	204	81	152	233	..	4	4	..	..	..
Harlem Valley	112	135	247	..	..	..	46	50	96	65	85	150	..	..	..	1	..	1
Hudson River	342	629	971	..	..	..	58	158	216	279	464	743	5	7	12	..	..	..
Kings Park	1,216	822	2,038	28	22	50	502	367	869	669	418	1,087	16	14	30	1	1	2
Manhattan	501	973	1,474	15	64	79	226	381	607	251	516	767	5	10	15	4	2	6
Marcy	91	454	545	..	3	3	35	122	157	54	321	375	2	8	10	..	..	..
Middletown	116	314	430	1	3	4	54	193	247	29	82	111	2	5	7	30	31	61
Pilgrim	224	631	855	1	..	1	57	133	190	165	486	651	1	3	4	..	9	9
Psychiatric Inst. and Hosp.	169	162	331	4	12	16	108	101	209	54	45	99	1	..	1	2	4	6
Rochester	199	283	482	23	27	50	126	84	210	49	166	215	1	3	4	..	3	3
Rockland	515	613	1,128	1	2	3	220	254	474	286	357	643	..	..	..	8	..	8
St. Lawrence	471	1,007	1,478	..	..	..	347	800	1,147	107	147	254	5	26	31	12	34	46
Syracuse Psycho. Hosp.	288	169	457	50	38	88	83	55	138	85	54	139	2	..	2	68	22	90
Utica	156	477	633	11	27	38	78	248	326	59	193	252	8	8	16	..	1	1
Willard	96	400	496	1	1	2	72	165	237	21	227	248	2	7	9	..	..	..
Total	7,259	10,776	18,029	246	268	514	3,231	4,576	7,807	3,519	5,651	9,170	108	141	249	149	140	289

*At end of year or at time of discontinuance of treatment.

TABLE 10. PER CENT DISTRIBUTION OF REPORTED CONDITION OF PATIENTS TREATED IN OCCUPATIONAL THERAPY DEPARTMENTS OF NEW YORK CIVIL STATE HOSPITALS DURING THE YEAR ENDED JUNE 30, 1935

State hospitals	Total number			Recovered			Improved			Unimproved			Died			Unreported		
	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total
Binghamton	353	363	716	6.5	7.7	7.1	51.3	34.7	42.9	37.1	53.4	35.4	4.5	2.5	3.5	0.6	1.7	1.1
Brooklyn	580	624	1,242	1.0	1.2	1.1	55.7	35.0	44.7	35.5	58.0	47.5	4.1	2.1	3.1	3.6	3.6	3.6
Buffalo	858	624	982	..	0.3	0.2	67.3	60.9	63.2	31.0	37.3	35.0	1.7	1.4	1.5	..	..	..
Central Islip	759	1,007	1,766	9.6	2.1	5.3	42.7	32.2	36.7	47.6	65.0	57.5	0.1	0.4	0.3	..	0.3	0.2
Creedmoor	530	778	1,308	..	1.3	0.8	11.9	36.8	26.7	86.0	60.7	70.9	2.1	1.3	1.6	..	..	..
Gowanda	177	273	450	5.1	..	2.0	49.1	42.9	45.3	45.8	55.7	51.8	..	1.5	0.9	..	..	..
Harlem Valley	112	135	247	..	..	..	41.1	37.0	38.9	58.0	63.0	60.7	..	..	..	0.9	..	0.4
Hudson River	342	629	971	..	..	..	17.0	25.1	22.2	81.6	73.8	76.5	1.5	1.1	1.2	..	..	..
Kings Park	1,216	822	2,038	2.3	2.7	2.5	41.3	44.6	42.6	55.0	50.9	53.3	1.3	1.7	1.5	0.1	0.1	0.1
Manhattan	501	973	1,474	3.0	6.6	5.4	45.1	39.2	41.2	50.1	53.0	52.0	1.0	1.0	1.0	0.8	0.2	0.4
Marcy	91	454	545	..	0.7	0.6	..	26.9	28.8	..	70.7	68.8	..	1.8	1.8	..	..	..
Middletown	116	314	430	0.9	1.0	0.9	46.6	61.5	57.4	25.0	26.1	25.8	1.7	1.6	1.6	25.9	9.9	14.2
Pilgrim	224	631	855	0.4	..	0.1	25.4	21.1	22.2	73.7	77.0	76.1	0.4	0.5	0.5	..	1.4	1.1
Psychiatric Inst. and Hosp.	169	162	331	2.4	7.4	4.8	63.9	62.3	63.1	32.0	27.8	29.9	0.6	..	0.3	1.2	2.5	1.8
Rochester	199	283	482	11.6	9.5	10.4	63.3	29.7	43.6	24.6	58.7	44.6	0.5	1.1	0.8	..	1.1	0.6
Rockland	515	613	1,128	0.2	0.3	0.3	42.7	41.4	42.0	55.5	58.2	57.0	..	..	..	1.6	..	0.7
St. Lawrence	471	1,007	1,478	..	..	..	73.7	79.4	77.6	22.7	14.6	17.2	1.1	2.6	2.1	2.5	3.4	3.1
Syracuse Psycho. Hosp.	288	169	457	17.4	22.5	19.3	28.8	32.5	30.2	29.5	32.0	30.4	0.7	..	0.4	23.6	13.0	19.7
Utica	156	477	633	7.1	5.7	6.0	50.0	52.0	51.5	37.8	40.5	39.8	5.1	1.7	2.5	..	0.2	0.2
Willard	96	400	496	..	0.3	0.4	..	41.3	47.8	..	56.8	50.0	..	1.8	1.8	..	..	..
Total	7,253	10,776	18,029	3.4	2.5	2.9	44.5	42.5	43.3	48.5	52.4	50.9	1.5	1.3	1.4	2.1	1.3	1.6

* Percentage was not computed when base was less than 100.

Rates of recovery and improvement per 100 of patients treated are shown in Table 10. Wide variation in results reported by the several hospitals is noted. This is partly due to differences in types of patients treated and partly to differences in standards applied in reported condition of patients. Hospitals reporting rates of recovery considerably above the average include Central Islip, Manhattan, Rochester and Syracuse Psychopathic Hospital. Hospitals reporting comparatively high rates of improvement comprise Buffalo, Middletown, Psychiatric Institute, St. Lawrence and Utica. The rates set forth in the table tend to confirm the general consensus of opinion that occupational therapy is one of the most important agencies used by the hospitals in promoting the improvement and recovery of patients.

TRENDS IN RECOVERY AND IMPROVEMENT

Trends in reported condition of patients after treatment by occupational therapy for the years 1926-1935 are shown in Table 11. The general uniformity in results for the several years indicates a high degree of standardization in occupational treatment and also in statistical reporting. In recoveries a slight upward trend is noted in both sexes although the rate of recovered female patients declined in 1935. Considerable difference in rates of improvement in the two sexes is noted.

TABLE 11. REPORTED CONDITION OF PATIENTS AFTER TREATMENT IN OCCUPATIONAL THERAPY DEPARTMENTS OF THE NEW YORK CIVIL STATE HOSPITALS, PER 100 UNDER TREATMENT, DURING FISCAL YEARS ENDED JUNE 30, 1926, 1927, 1928, 1929, 1930, 1931, 1932, 1933, 1934 AND 1935

Year	Per 100 under treatment														
	Recovered			Improved			Unimproved			Died			Unreported		
	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total
1926	2.2	1.9	2.0	45.3	48.7	47.5	49.7	45.6	46.9	1.4	1.6	1.6	1.4	2.2	2.0
1927	1.9	2.3	2.2	46.8	50.0	49.0	49.2	44.6	46.1	0.9	1.1	1.0	1.2	2.0	1.7
1928	2.6	2.4	2.4	47.5	45.6	46.3	47.8	49.7	49.0	1.0	1.6	1.4	1.1	0.7	0.9
1929	2.2	2.2	2.2	49.9	47.1	48.2	45.1	48.7	47.3	1.7	1.6	1.6	1.1	0.4	0.7
1930	2.3	2.3	2.3	47.1	43.1	44.6	48.0	52.3	50.7	1.8	1.5	1.6	0.8	0.7	0.7
1931	2.3	2.8	2.6	49.4	42.9	45.4	45.8	52.0	49.6	1.4	1.8	1.7	1.0	0.6	0.8
1932	2.9	3.0	2.9	48.1	40.8	43.6	45.6	53.7	50.6	1.6	2.0	1.8	1.8	0.6	1.0
1933	2.4	3.0	2.7	48.5	46.7	47.4	45.4	47.7	46.8	1.1	1.5	1.4	2.7	1.0	1.7
1934	3.7	3.0	3.3	48.7	43.5	45.6	44.9	50.4	48.2	1.2	1.7	1.5	1.5	1.4	1.4
1935	3.4	2.5	2.9	44.5	42.5	43.3	48.5	52.4	50.9	1.5	1.3	1.4	2.1	1.3	1.6

TABLE 12. REPORTED CONDITION* BY MENTAL DISORDERS OF PATIENTS TREATED IN OCCUPATIONAL THERAPY DEPARTMENTS OF THE NEW YORK CIVIL STATE HOSPITALS DURING THE YEAR ENDED JUNE 30, 1935

Mental disorders	Total			Recovered			Improved			Unimproved			Died			Unreported		
	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total
General paresis	708	252	960	3	..	3	319	98	417	350	145	495	27	8	35	9	1	10
Alcoholic	451	181	632	108	23	131	198	93	291	136	60	196	5	3	8	4	2	6
With cerebral arteriosclerosis ..	441	478	919	3	10	13	187	173	360	231	266	497	16	23	39	4	6	10
With convulsive disorders ..	188	212	400	6	7	13	68	76	144	109	122	231	3	5	8	2	2	4
Senile	120	229	349	1	..	1	26	52	78	76	162	238	13	11	24	4	4	8
Involutional	171	487	658	4	5	9	88	247	335	74	221	295	5	10	15	..	4	4
With organic changes of nervous system	102	71	173	2	1	3	41	23	64	59	44	103	..	2	2	..	1	1
Psychoneuroses	148	287	435	9	24	33	101	180	281	35	78	113	2	1	3	1	4	5
Manic-depressive	713	1,922	2,635	50	108	158	400	954	1,354	233	818	1,051	8	22	30	22	20	42
Dementia praecox	3,375	5,495	8,870	17	18	35	1,427	2,127	3,554	1,685	3,253	5,138	17	41	58	29	56	85
Paranoia and paranoid conditions	64	193	257	..	1	1	33	102	135	28	79	107	1	4	5	2	7	9
With psychopathic personality ..	169	224	393	16	26	42	88	108	196	62	83	145	..	4	4	3	3	6
With mental deficiency	199	437	636	12	9	21	86	197	283	88	221	309	3	2	5	10	8	18
Undiagnosed	88	101	189	1	9	10	45	47	92	39	40	79	2	1	3	1	4	5
All others including those without psychosis	316	207	523	14	27	41	124	99	223	114	59	175	6	4	10	58	18	76
Total	7,253	10,776	18,029	246	268	514	3,231	4,576	7,807	3,519	5,651	9,170	108	141	249	149	140	289

*At end of year or at time of discontinuance of treatment.

TABLE 13. PER CENT DISTRIBUTION OF REPORTED CONDITION BY MENTAL DISORDERS OF PATIENTS TREATED IN OCCUPATIONAL THERAPY DEPARTMENTS OF THE NEW YORK CIVIL STATE HOSPITALS DURING THE FISCAL YEAR ENDED JUNE 30, 1935

Mental disorders	Total number			Recovered			Improved			Unimproved			Died			Unreported		
	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total	Males	Females	Total
General paresis	708	252	960	0.4	..	0.3	45.1	38.9	43.4	49.4	57.5	51.6	3.8	3.2	3.6	1.3	0.4	1.0
Alcoholic	451	181	632	23.9	12.7	20.7	43.9	51.4	46.0	30.2	33.1	31.0	1.1	1.7	1.3	0.9	1.1	0.9
With cerebral arteriosclerosis	441	478	919	0.7	2.1	1.4	42.4	36.2	39.2	52.4	55.6	54.1	3.6	4.8	4.2	0.9	1.3	1.1
With convulsive disorders ..	188	212	400	3.2	3.3	3.3	36.2	35.8	36.0	58.0	57.5	57.8	1.6	2.4	2.0	1.1	0.9	1.0
Senile	120	229	349	0.8	..	0.3	21.7	22.7	22.3	63.3	70.7	68.2	10.8	4.8	6.9	3.3	1.7	2.3
Involutional	171	487	658	2.3	1.0	1.4	51.5	50.7	50.9	43.3	45.4	44.8	2.9	2.1	2.2	..	0.8	0.6
With organic changes of nervous system	102	71	173	2.0	*	1.7	40.2	*	37.0	57.8	*	59.5	..	*	1.2	..	*	0.6
Psychoneuroses	148	287	435	6.1	8.4	7.6	68.2	62.7	64.6	23.6	27.2	26.0	1.4	0.3	0.7	0.7	1.4	1.1
Manic-depressive	713	1,922	2,635	7.0	5.6	6.0	56.1	49.6	51.4	32.7	42.6	39.9	1.1	1.1	1.1	3.1	1.0	1.6
Dementia praecox	3,375	5,495	8,870	0.5	0.3	0.4	42.3	38.7	40.1	55.9	59.2	57.9	0.5	0.7	0.7	0.9	1.0	1.0
Paranoia and paranoid conditions	64	193	257	..	0.5	0.4	*	52.8	52.5	*	40.9	41.6	*	2.1	1.9	*	3.6	3.5
With psychopathic personality	169	224	393	9.5	11.6	10.7	52.1	48.2	49.9	36.7	37.1	36.9	..	1.8	1.0	1.8	1.3	1.5
With mental deficiency	199	437	636	6.0	2.1	3.8	43.2	45.1	44.5	44.2	50.6	48.6	1.5	0.5	0.8	5.0	1.8	2.8
Undiagnosed	88	101	189	*	8.9	5.3	*	46.5	48.7	*	39.6	41.8	*	1.0	1.6	*	4.0	2.6
All others including those without psychosis	316	207	523	4.4	13.0	7.8	39.2	47.8	42.6	36.1	28.5	33.1	1.9	1.9	1.9	18.4	8.7	14.5
Total	7,253	10,776	18,029	3.4	2.5	2.9	44.5	42.5	43.3	48.5	52.4	50.9	1.5	1.3	1.4	2.1	1.3	1.6

*Percentage was not computed when base was less than 100

Reported condition of patients after treatment, classified by psychoses, is shown in Tables 12 and 13. As would be expected results are least favorable in the parietic and senile groups and most favorable in the alcoholic, manic-depressive and psychopathic groups. Other groups showing noteworthy gains during the period of treatment include psychoneuroses, involutional psychoses, paranoia and psychoses with mental deficiency. The recovered and improvement groups together comprise 46.2 per cent of all patients treated.

CONCLUSIONS AND COMMENT

1. The use of occupational therapy in the civil State hospitals continues in gradually increasing magnitude.
2. A notable increase in the number of patients receiving physical training occurred in 1935.
3. Gains in 1935 were made in several hospitals in providing occupational therapy for male patients.
4. Further expansion of occupational treatment facilities appear desirable in certain hospitals.
5. Occupational treatment continues to be applied with gratifying results to patients of all age and psychotic groups.
6. The steady increase in occupational therapy personnel indicates growing interest in this form of treatment and a general desire to make it as efficacious as possible.

A METHOD OF FURTHERING COOPERATIVE TREATMENT BY CLINICS AND COMMUNITY AGENCIES

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Psychiatrists and psychiatric social workers engaged in the diagnostic and preventive work in community clinics, whether this work be with adults, children or both, have long been of the opinion that the time at their disposal for work with each individual case was so limited as to preclude the possibility of the lengthy treatment which they would like to accord the patient. As the attendance at the clinics has increased, the clinic personnel has been increased to meet the demand, but there is, at the present time at least, a very definite limit to the number of workers who can be furnished to any given clinic, especially at public expense. Further assistance in the community treatment of mental clinic patients must therefore be found elsewhere if the clinic service is to continue its expansion. It is the purpose of this report to describe a method by which this assistance has been obtained at the Utica Dispensary, one of the clinics conducted by the Utica State Hospital.

The personnel of this clinic consists of the psychiatrist, the psychiatric social worker and such students of social work as are assigned for their field apprenticeship to the hospital by the Smith College School for Social Work or by Skidmore College. The time at the disposal of the clinic is carefully apportioned to allow each patient and interested relative an interview with the social worker as well as the routine history-taking period. The psychiatrist is enabled to give the return cases on an average of 15 to 20 minutes each and the new cases from 45 minutes to 1¼ hours. This set-up is felt to be adequate in our present stage of development for most of the cases seen, including:

1. Instances where the sole purpose of the clinic visit is to ascertain whether the client should be treated in an institution for the care of mental illness or might remain with an intelligent and economically able family.
2. Instances where the client is referred by the city court for an opinion as to the sanity or insanity of a minor offender.
3. Cases referred by private physicians for examination, diagnosis and advice.
4. Those referred as problems by the school authorities who desire advice and recommendations so that they might more ably meet the situation.
5. Clients with advanced psychoneurotic symptoms who need constant reassurance and treatment but are unable to pay for them; who will not enter a hospital and can maintain themselves in the community.

There is, however, another large group of clients consisting of those who evidently need psychiatric treatment and social readjustment but who are either borderline, not requiring immediate hospitalization or who for personal or family reasons do not wish hospitalization. It includes those whose symptom reaction is situational in character as well as those who by intelligent treatment may be maintained in the community under appropriate supervision, just as improved but not recovered parole patients are maintained. It is a group which needs intensive, frequent and personal treatment over a long period of time and it includes the cases which will benefit most from that treatment.

It is manifestly unfair to expect monthly or bi-weekly interviews with the psychiatrist or the occasional home visit which can be made by a social worker already burdened with a hospital case load to accomplish this preventive and restorative task. These forms of endeavor are of undoubted value and should, of course, be continued but they must be supplemented by the efforts of other parties if the full benefit of present psychiatric knowledge is to be accorded to the clients and indirectly to the community.

The first efforts are naturally made with the families and relatives of the clients. Unfortunately, these individuals are in many cases unable to help the psychiatric workers because of either intellectual, emotional, or time factors, or their efforts may be insufficient. There is, however, another large group present in the community who by virtue of their position, their activities, and their purpose are admirably suited to serve as an adjunct in the proper psychiatric treatment of this group of cases. Every community has at least one and most have many social agencies, public or private, which are already supplied with a corps of social workers. Some of these workers are the beneficiaries of a well-grounded training in mental hygiene, some have received only a smattering of the principles and some have no direct knowledge of mental hygiene at all. No matter what their knowledge, they all have an intense interest in their client's welfare, an interest in the general welfare of their community, and a willingness to be of service in any program that is beneficial and comprehensible. Working under the supervision and suggestion of the psychiatrist and psychiatric social worker they will learn and apply the principles of mental hygiene, especially when they understand that their clients will benefit and that the quality of their work can be increased thereby. They, in the routine of their duties, appear to furnish one means by which psychiatric treatment can be extended into the frequent and lengthy process which might lead to a solution of the individual case. Frequently they wield the instruments through which treatment can be made effective. Their aid spreads the burden of the social

treatment lightly on many shoulders and does not materially increase the case load of any one individual.

To obtain the cooperation of this group, there must exist between it and the clinic personnel a mutual understanding of the problem and the objective at which treatment is aimed. This cannot be accomplished by hurried interviews during the progress of the clinic or by the cold impersonal route of correspondence. A far better medium is that of a round-table conference held on the day following the clinic, or thereabouts, at which the community social workers and the clinic personnel can discuss the entire situation, exchange viewpoints, and map out a mode of attack aimed at a solution of the individual client's personality-environment difficulties. It is with the promising results of such a case conference system that the cases in this report deal.

In 1933, Miss Eva Schied, chief social worker at the Utica State Hospital and Utica Mental Clinic, with the cooperation of Dr. R. D. Helmer, then clinical director of the hospital and neuropsychiatrist for the Utica Dispensary, established such a series of "case conferences." The purpose of these at the time of their establishment was threefold, as outlined by Miss Schied:

1. To give the social work students an opportunity to understand the psychiatrist's recommendation in the cases with which the students were working in the clinic.

2. To give them an opportunity to meet the community social workers in our own office, making for better cooperative work between them and the outside agencies.

3. Most important of all, it was hoped that it would make the work in the community more effective by giving the local social workers and officials the psychiatrist's viewpoint.

The conferences have not only successfully carried out these purposes, they have also increased the scope of the clinic treatment. They have given the local social workers and officials the psychiatrist's viewpoint and they have opened a means of enlisting their aid in the treatment of many clinic cases, a treatment which the clinic personnel could not have accomplished by itself. Among the officials who have attended conferences are the judge of the city court, the chief case supervisor of the city department of public welfare, the Boy Scout executive of Utica, the president and executive secretary of the board of child welfare, the director of the Catholic Charities the executive secretary of the Family Welfare Association and the director of the Utica Visiting Nurses' Association. In all, 72 interested officials and workers have attended these conferences in the two and one-half years of their existence.

The following case histories illustrate some of the results which can be obtained by this cooperation. They are not intended to convey the impression that all cases are equally successful but rather to show that additional efforts on the part of the clinic personnel in cooperation with community agencies, are productive of increased results.

Betty R., a girl of 19, married and five months pregnant, was referred because of fainting, insomnia, choking spells and episodes of screaming and pounding on the walls. The history indicated that she had been a resident of a State school for the feebleminded from 1928 to 1932, or from 13 to 17 years of age. Several psychometric examinations in that interval revealed an I. Q. of from 53 to 56, classifying her as a low-grade moron. Physical examination was negative except for a mild degree of undernutrition. She dated the onset of her symptoms from the time of her marriage, said that she was afraid of dying during pregnancy; that she couldn't go through with it, and that she feared her sickness might "mark" the baby. She told of the many tales of accident or misfortune during pregnancy and delivery which had been described to her by relatives and friends. She then added that these made her so nervous and frightened that at times she did not know what she was doing. Her husband described episodes which resembled temper tantrums or panics.

The husband appeared of somewhat higher intellectual rating than the patient and anxious to help in the situation. Her fears and their exciting factors were briefly described to him. He was instructed to isolate her from the pessimistic purveyors of tragic tales to whom she had been listening, and told that his greatest help would be in the form of reassurance. A mild sedative and a tonic were prescribed. Investigation showed that no adult relatives were living sufficiently near to be of assistance.

Inasmuch as the Visiting Nurses' Association was already interested in the case, their representative was invited to a clinic conference and the case was thoroughly discussed with her. The needs of reassurance, of instruction in the normal course of pregnancy, and of a cheerful optimistic attitude toward the impending delivery were outlined. Frequent visits with an attitude of intelligent sympathy, of guidance and of assistance were suggested.

One week later there was some slight improvement in the situation, the husband stating that the visit of the nurse had been received with gratitude by his wife. The choking spells and the fainting continued but the screaming episodes had not been repeated. Fourteen days after this both the patient and the husband reported favorably, all symptoms had disappeared with the exception of insomnia. The patient presented a more stable and re-

laxed composure and was looking forward without fear to her delivery. Six weeks after this interview she was delivered. During the interval, the visiting nurse had visited at least once, and more often twice, each week and continued to do so after the delivery.

Since then there have been some emotional outbursts and the family occasionally cause difficulty for the welfare authorities. A complete resolution of this case is not claimed but it is felt that this patient was helped over a particularly difficult situation by means of occasional clinic visits and more frequent visits from a visiting nurse who was prepared to carry on some mental hygiene treatment.

Charles S., a young man of 24, was referred to the mental clinic by the judge of the city court for a psychiatric examination following his arrest for indecent exposure involving several young girls. He had finished the eighth grade but was denied high school because of his family's poor financial situation. Recently he had been unemployed and had become seclusive and indolent. He showed an I. Q. of 90 and a retarded psychosexual development. He freely admitted his act and spoke of a resolve to avoid future trouble. The community had demanded a jail sentence but the judge, with the backing of the mental clinic, placed him on parole for two years and instructed him to report to the mental clinic monthly. At first the client continued his previous inactivity, explaining that he couldn't do anything without money. When it was found that he had formerly been a member of the Y. M. C. A., the general secretary of that organization was contacted. He agreed willingly to aid in the constructive program, going so far as to furnish the client with a year's membership free of charge. Under the stimulation of this show of interest, the young man gradually resumed his former activities in the group, later found employment and has finished his two-year parole period without mishap. On the occasion of his last interview he expressed deep appreciation of the treatment accorded him by the clinic and the efforts of the others who had helped him over the period of turmoil. He also showed a reasonable degree of insight into his personality problems.

In this case, cooperative treatment by the court authorities, the Y. M. C. A. staff and the clinic personnel saved the youth from the humiliation of a jail term and accomplished a constructive bit of mental hygiene work.

John L., Italian-born, 47 years of age, resident in the country for 15 years and a citizen, the father of seven children ranging in ages from 9 months to 26 years, was referred by the city court following his incarceration, on the charge of hitting his 26-year-old daughter over the head with a pail. The information indicated this to be the culmination of a long-stand-

ing intrafamily feud and reported him as possessing an "extremely bad temper." The client was a hardworking laborer with rather high ideals and the familiar European ideas concerning the position of the father in the family. He had invested all his meager savings in a large two-family house which was heavily mortgaged. In order to meet his tax and interest payments, he rented both apartments and lived with his own family in a small flat on which he paid less rent than he received from each apartment in his own house. With his wages lowered, he was using every available penny to meet payments on the house. His wife and oldest daughter resented this extremely and had tried to persuade him to give up the house but without success. A further contribution to the family situation was the rebellion of the older children to the father's rather severe domination, exaggerated by their own inability to find gainful employment. The client's irritability was undoubtedly increased by his fears of losing his entire investment if unable to meet the payments. On the night in question his daughter had not heeded his warnings about using too much water while mopping the floor, he had become excited and when he tried to take the pail from her had accidentally hit her with a light blow in the head. Aside from an emotional volatility there were no psychopathic traits noted and the situation appeared limited to the family. The judge was so informed at a clinic conference. He decided to parole the client and ordered him and his wife to report bi-weekly at the mental clinic. It was soon discovered that neither party to the disagreement was willing to yield his own viewpoint. The client's employer was interested in his welfare and was willing to help in the situation as the client had been a steady worker for over 17 years. Accordingly, a conference was held, attended by the client, his wife, the judge, the employer's representative, and the clinic personnel. Both sides of the family situation were brought into the open and frankly discussed. The financial problem was figured in detail and it was found that without any payments on the principle of the mortgage, the expenses of the house were not being met by the income from it, thus eating up much of his personal income. The employer's representative became extremely interested in this side of the problem and volunteered her assistance in finding a means of relieving the situation if possible. She and the clinic social worker found an arrangement whereby a local bank official agreed to handle the finances of the house, collect rents and allow the client to maintain a garden on the premises in return for a six per cent commission on all transactions. At first the client was reluctant to accept this arrangement but when reassured did so willingly. Thus relieved of his heavy financial burden, the client's general attitude improved and some of his irrita-

bility disappeared. The domestic disagreement is still an issue but there are very definite deep-seated reasons for this.

In this case no permanent readjustment was accomplished but a family situation that was rapidly becoming intolerable has been eased and the integrity of the family prolonged for over one year. This was accomplished in part with the efforts of a private citizen whose assistance was enlisted by the clinic conference. The cordial relationship between the city court and the clinic, fostered by the clinic conferences, was also a factor in the ameliorating treatment of this case.

Elsie B., a woman of 40 years and mother of a six-year-old daughter was referred by the admitting nurse of the dispensary when she applied for treatment for "nervousness." She gave a history of sleeping sickness at the age of 31 with an illness of three weeks. Physically, she presented the clinical picture of early chronic encephalitis lethargica with marked tremors of the extremities, eyelids and tongue as well as a loss of associated movements. She also presented a moderate degree of hypertension and obesity. According to her statements she was becoming increasingly more irritable and quick-tempered in her relations with her husband, daughter and friends. Also she felt depressed most of the time and wept too easily. However, she denied any suicidal ideas or intent. It appeared that her worries were largely over the precarious financial situation of the family. The husband had been discharged from the railroad several years back and was earning about \$5 per week as a salesman. They were living in a tenement for which they were charged no rent but which they were in danger of losing.

As a first step in therapy, the patient was told of the origin of her physical illness, that it probably could never be cured but that some improvement could be expected under treatment. This at first merely further upset her but before leaving the examining room she expressed a relief in finding a physical reason for her illness. Tincture of stramonium was prescribed.

Because of the reported financial crisis in this family the Catholic Charities were notified and they investigated it. A short time later, the family applied for relief at the city department of public welfare. This information was obtained in a subsequent interview when the patient was very depressed and the tremors were unabated although she was of the opinion that her irritability had lessened. Since the mental symptoms appears to be increasing in severity, a clinic conference was held, attended by the social workers from the Catholic Charities and the city department of public welfare. The physical and mental symptoms were discussed with stress on the possible serious effects of a continuation of economic insecurity on this unstable indi-

vidual who was suffering from an organic condition of the central nervous system. Shortly thereafter the patient's husband was contacted and the procedure of commitment outlined to him in the eventuality that suicidal threats became prominent. This proved to be an unnecessary move for there was some improvement in the client's condition when city relief was started shortly after the conference. The husband then lost all means of livelihood but the welfare authorities immediately increased the family allowance to meet this new crisis. When in a few weeks the husband obtained steady employment at a good wage, further mental improvement was evident. Nothing more was heard from the case for four months but at that time a recurrence of mental symptoms was almost coincidental with the husband's next loss of employment. This situation was met as before and again marked improvement was noted when the husband was able to find suitable wage-earning activity. Fortunately this new situation has continued and the client has since voluntarily returned to her private physician for treatment.

In this case, a woman who personally sought treatment for a "nervous condition" was treated by the joint efforts of the mental clinic and the public welfare authorities in such a way that she was tided over an economic and emotional crisis, the final solution of which was obtained when her husband was able to re-enter private employment. It is not unlikely that these joint efforts prevented a serious mental illness in this case and averted the necessity of commitment.

Frank F., a 36-year-old Italian laborer, came to the clinic voluntarily because he said "My mind talks to me and tells me to do something wrong, I want help from a brain doctor." He had seen 44 months of active service in the World War. He was married and the father of four children from three months to seven years old. His wife had an arrested case of pulmonary tuberculosis, suffered from occasional attacks of acute arthritis and had been recommended for a tonsillectomy. His wages as a day laborer for railroads and construction companies had averaged about \$20 a week until part time employment had reduced this figure to about \$12. The family lived in a tenement of his mother-in-law's house for which he had paid her no rent for one year. He complained of intermittent headaches, difficulty in thinking, reduction of memory and diminution of mental acuity for a period of two years. He spoke of obscene and compulsive thoughts toward women he saw on the streets. He complained that he experienced impulses to cut his children's throats while he was shaving. Further, he spoke of carrying on imaginary conversations with prominent officials and his imme-

diate superiors concerning the injustices of the social situation in which he found himself, working for less money than recipients of relief were given. Although he heard the voices of these people, he realized that all the talking took place in his own mind. He recited many dreams, most of which were of strongly homoerotic coloring. He expressed much antagonism toward local relief authorities and especially toward certain individual investigators. Physical examination revealed no strikingly abnormal findings.

The usual therapeutic measures of the clinic were instituted and contact made with the Catholic Charities who increased the family milk supply, indirectly increasing his income in this way. For several months he showed slight improvement but after six months a crisis approached. He received news of his impending discharge from private employment and at his next visit to the clinic reported that he had heard voices talking about him and had ideas that people were working against him in having him discharged. Although he recognized these as internal manifestations, the entire trend was definitely paranoid. Connected with his personality type, this gave the clinic personnel a degree of uneasiness and all persons connected with the case were warned of the possibility of commitment becoming necessary. However, since one purpose of the clinic was to carry on community treatment wherever possible or safe, a further effort was decided upon. Our client was about to become a recipient of relief and it was felt that the administrators of this might be of great aid in the treatment procedures.

A clinic conference was accordingly requested and the invitations accepted by officials and representatives of the public welfare department. The situation was outlined with stress on the client's personality make-up and its needs. Arrangements were made for him to be transferred immediately to work relief and receive as much preference in this as possible under the system of just division of opportunity. His budget was enlarged to provide extra milk for the children, especially one who had a cardiac condition; further he was to be given the control of his expenditures as much as possible. His rent situation was to be investigated particularly, to prevent any unpleasantness between the client and his landlady, the mother-in-law. The Christian Science Monitor was donated by the Christian Science Association at the request of the hospital social worker. The individual investigator showed great interest and asked for an interview technique in dealing with the client and his family.

All these measures, or more properly, treatment procedures, were carried out. The client made a successful readjustment and the morbid symptoms soon disappeared. Now, one and a half years later he attends the clinic occasionally with a few psychoneurotic complaints but is still employed on

work relief as the support of his family. Although he still mentions injustices of the economic situation, his reaction is far more healthy.

In this case, it is felt by means of the interest inspired in the public welfare officials by the clinic conference, and the cooperative treatment given by them in conjunction with and at the suggestion of the clinic personnel, a crisis in the mental health of the client was successfully passed and a commitment to a State institution was avoided. At least, without their help, a poor result had been anticipated.

In three of these cases, the treatment was almost entirely supportive in type. In only two was the material considered of sufficient caliber to warrant any attempt at insight-giving treatment, and in these it was supplemented by supportive treatment. The clinic personnel is of the opinion that the cooperation of the various workers and officials from community agencies was the essential factor by which this treatment was made effective. It also has commented on the willingness with which the agencies have cooperated and the readiness of their workers to accept the suggestions and carry out the recommendations of the clinic psychiatrist. This attitude on the part of the community workers speaks well for the cooperative spirit which exists between the hospital social service staff and the lay workers, a spirit which we believe has been greatly aided by the clinic conferences in which free exchange of ideas and viewpoints is possible and during which any misunderstandings can be cleared away. Further, by them a portion of the psychiatric treatment is returned to the individual lay worker who is thus required to assume some responsibility for the eventual outcome of the case. This acts as an incentive to the progressive and ambitious worker, deepening his or her interest in the case and paving the way for that constructive personal work which is the goal of all professional people.

In summary we feel that the clinic conferences have amply fulfilled the purposes for which they were founded, and have also proven to be a means of extending clinic treatment procedures to a group of cases hitherto dealt with rather unsatisfactorily. In addition there appear to be further benefits from them for both the community and the cause of psychiatry. The conferences serve as a proving ground where the clinic can illustrate the efficacy of a mental hygiene program for the community and as a means of dissemination of psychiatric principles, doing this among the leaders of the practical social welfare thought in the locality. It furnishes a forum for the discussion of the needs of the community from a psychiatric viewpoint on one side and on the other, the difficulties which such programs will meet from the public viewpoint. For these many reasons, the clinic conference is a valuable addition to the activities of the clinic personnel, one which is well worth the extra time and effort involved.

THE PRESENT STATUS OF MENTAL HYGIENE AND OF MENTAL HYGIENE CLINICS IN THE BINGHAMTON STATE HOSPITAL DISTRICT

Information Obtained Through Questionnaires

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The value of mental hygiene as a means of attaining a happy mental, as well as a happy physical life, has been very gradually appreciated by our intelligent citizens and public officials. These individuals are today applying many of the principles of mental hygiene in their work and are advising persons with mental illnesses or behavior problems to visit and to consult our psychiatrists.

The present appreciation of the value of mental hygiene has come about through the efforts of those interested in the subject and through the efforts of our own New York State Department of Mental Hygiene, which is considered to be one of the most progressive departments of its kind in the United States. It has brought mental hygiene to the attention of the public through lectures, broadcasts, pamphlets, magazine articles, child guidance clinics and mental hygiene clinics.

A number of years have passed since the establishment of the mental hygiene clinics and it can be shown that since their establishment they have contributed to the attainment of many happier lives. The mental hygiene clinics in the Binghamton State Hospital district are held monthly, bi-monthly or weekly in several cities in that district: Binghamton, Oneonta, Elmira, Cortland and Norwich; and are conducted by a psychiatrist and a social worker from the hospital. I am not qualified to discuss, and I do not refer to, in this paper, the child guidance clinics which have been separately established by the Department of Mental Hygiene, but I feel that some of the information which I have obtained has been influenced by, or is a reflection of, these child guidance clinics.

The work of the psychiatrist at each mental hygiene clinic consists of interviewing and advising patients who are not on parole from the Binghamton State Hospital and any other persons who may have mental problems. Many of the new cases are mental defectives who present behavior problems for which the authorities of the community wish advice. There are also problem-child cases, court cases and adults suffering from a psychoneurotic illness.

As a psychiatrist who conducts mental hygiene clinics at Oneonta and at Norwich, I feel that I have contributed a share to the betterment of the

welfare of individuals in those communities. However, I believe that I could do more, and I realize many deficiencies in my accomplishments. Because of this I have been interested in knowing what other people think about such clinics, that is, I have wanted to know what those who take advantage of the clinics and the communities in general think of the clinics and the mental hygiene program as a whole. I have frequently said to myself, "This nurse or social worker has a peculiar attitude. I wonder what she thinks and expects of this clinic. What is her attitude toward mental hygiene? What is the attitude of the public in general? Do they know 'what it is all about'? Are they using the clinic just because they do not know what else to do?" I have felt that they could present to me constructive suggestions and criticisms if I asked for them.

To gain this information I compiled a questionnaire containing ten questions which pertained to mental hygiene and the mental hygiene clinics. Fifty questionnaires were sent to judges, county and city social workers, county and city nurses, welfare workers and probation officers, all of whom are located in this hospital district and have been interested in the mental hygiene program and the mental hygiene clinics. They were not asked to sign their names but were requested to state their official positions. As a result, 46 questionnaires were completed and returned to me.

The questions contained in the questionnaires were as follows:

1. What is the consensus of opinion as to the value of the mental hygiene movement in the community?
2. What interest has been shown and by whom?
3. Do you feel that the community in which you are would be receptive to further knowledge in mental hygiene?
4. How do you get in touch with children or adults who need help for their behavior or mental problems? Who refers them to you?
5. What do the persons or organizations referring these cases expect of the psychiatrist at the mental hygiene clinic?
6. Who follows the progress of the cases and who sees that the advice given by the psychiatrist is carried out? What check-up is made?
7. What is the reaction of the parents when they are advised that their relative, child or adult, should be taken to the psychiatrist?
8. What is the reaction of the child or adult who is mentally ill?
9. How difficult, in general, is it to get the patient to come to the clinic to see the psychiatrist? Does he have to be "dragged" to the clinic?
10. What is your opinion of the results obtained by means of the mental hygiene clinics? Frankly criticize this point. What improvements have you to suggest?

These questions were considered and revised by several psychiatrists at this hospital, but even now, there seems to be some repetition and some of the questions are probably inadequate. However, the answers received and the information obtained from them has shown that the opinions expressed by judges, nurses, social workers, and probations officers in this entire hospital district are very similar. They show that the clinics in this district, even though they are conducted by various psychiatrists, have the same problems and serve the same purposes. Because of this, the opinions expressed have not been divided into groups according to the profession of the person answering the questions or according to the psychiatrist who conducts each clinic.

To present all the information obtained, I wish, at first, to take each question separately and to summarize the answers to it as briefly as possible. Following this, I shall summarize all answers and try to emphasize the highlights.

QUESTION ONE. *What is the consensus of opinion as to the value of the mental hygiene movement in the community?* All but two of those answering this question stated that the mental hygiene program was a very worthwhile one but that they believed that the communities are not well enough acquainted with the subject to know its value or to be able to express an opinion. A brief composite of all the answers can be made as follows: when the subject is brought to the attention of any person or group of persons, they seem eager to learn more about it but the average person in the communities considered is not familiar with the subject and, up to the present time, has expressed few or no opinions as to its value. However, those persons in the communities who are better educated or have taken advantage of the clinics think highly of the mental hygiene program. Two nurses stated that they believed mental hygiene of no value.

QUESTION TWO. *What interest has been shown and by whom?* According to the information received, interest in mental hygiene has been shown by those who are public officials or by relatives who have mentally ill persons in their family. The public officials mentioned are the judges, the county and the city nurses, the county and the city social workers, the probation officers, the children's agents, the welfare workers, the superintendents, the principals and the teachers of schools. The parent-teachers associations and a few church groups have shown some interest in the lectures given to them by psychiatrists but the interest created by such lectures has not been great.

QUESTION THREE. *Do you feel that the community in which you are would be receptive to further knowledge in mental hygiene?* This question

was answered very briefly, "yes" by most of those completing the questionnaire. However, some of the specific statements were as follows. "If presented in a concise way which all can understand." "Yes, although considerable tact will be required at first to carry out the program more thoroughly." "A small amount." "On the whole, no, at present although it could be worked up." "The community need this but I am not sure whether or not they are receptive." "I sincerely think the community is open to further knowledge in mental hygiene and would welcome it."

QUESTION FOUR. *How do you get in touch with children or adults who need help for their behavior or mental problems? Who refers them to you?* To this the answer is, briefly, that persons with mental or behavior problems are seldom referred by parents to the clinics. These persons are reached through doctors, welfare departments, county agents, teachers, children's courts, police courts and neighbors. Many of the children are "picked up" during investigations of persons on relief or on visits to the homes of the sick who are cared for by the public nurses; also, when the nurses visit the schools and attention is brought to the problem or retarded child.

QUESTION FIVE. *What do these persons or organizations referring these cases expect of the psychiatrist at the mental hygiene clinic?* Nine of the 46 persons answering this question stated that they expected a mental test or I. Q. and a recommendation for institutionalization of the patient. The remainder stated that they wished frank opinion, advice and constructive help for the problem of the patient as well as methods of teaching retarded and problem children. Several emphasized the clear-cut constructive advice and method of handling the problem. A director of a city social service department stated, "I am not conscious that people referring such problems have any definite expectation from the psychiatrist or the mental hygiene clinic. They are chiefly conscious of problems they are unable to deal with and hope for assistance usually in the form of a miracle and the complete change of personality." A county nurse stated, "Too much, some people seem to believe all problems can be solved by one or two visits. Others use reason, and there are those inquiring neighbors who would like a complete report of the case referred." Another nurse stated "They seem to expect their troubles to be straightened out and a way found around the difficulties."

QUESTION SIX. *Who follows the progress of the cases and who sees that the advice given by the psychiatrist is carried out? What check-up?* In most cases the follow-up work is done by those who are interested in the patient's problems or who bring the patient to the clinic, that is, by the nurse or social worker but, in court cases, by the probation officer and by

the judge. However, many responses were to the effect that it was felt that the follow-up work was poorly taken care of. A Red Cross nurse stated "As in other health instruction problems, much potential benefit is forfeited through the weakness of the service." A social worker said "Very seldom anyone, where we fall down." Another wrote "Various agencies are supposed to do this but I doubt if they do a real job. Like everything else, when the immediate matter at hand is attended to we allow things to drift and *hope* things will come out o. k. If someone connected with the clinic could review this and date them up for further visits, more lasting results would be obtained." A director of the Visiting Nurse and Tuberculosis Association stated "In a very limited way the nurse who refers the case follows the patient and inasmuch as her knowledge in mental hygiene at best is limited she is not able to do a very satisfactory job. This is one place where we feel very strongly that there should be a full-time psychiatric social worker available to the agencies in the community."

QUESTION SEVEN. *What is the reaction of the parents when they are advised that their relative, child or adult, should be taken to the psychiatrist?* According to the information received, a comparatively large percentage of the parents are non-receptive to the advice given them. Many parents are very indignant, especially those of the unintelligent group. They call it a "crazy" clinic. However if the person has confidence in the individual who is advising him, he can be persuaded to allow his relative to see the psychiatrist and can be made to realize the value of such a consultation. The type of approach made to the parent is, according to some, very important. A Red Cross nurse wrote "When an adult or his family is approached, I never suggest that the clinic is for mental defect or abnormality but advise that the clinic is for those who are extremely nervous and feel they are losing control of their thoughts and conduct or have undesirable personality traits." A probation officer stated "I find that parents and relatives are increasingly cooperative in having their children or friends taken to the mental clinic. Five years ago it was almost impossible to get parents to cooperate." A county judge stated "At first the reaction was fear and unwillingness in most cases. As the work continued, cooperation on the part of the parents and members of the family improved greatly." A commissioner of welfare stated "Sometimes very antagonistic because of ignorance, or misconception of program or of consciousness of their own guilt."

QUESTION EIGHT. *What is the reaction of the child or adult? Is he afraid of being diagnosed as "crazy"?* It would appear from the questionnaire that the majority of those mentally ill who are brought to the clinic do not

appreciate their condition. Those who do appreciate their condition make some objections at making the first visit but are very willing to come the second time. Usually the patient is not informed as to the nature of the clinic he is to attend.

QUESTION NINE. *How difficult, in general, is it to get the patient to come to the clinic to see the psychiatrist? Does he have to be "dragged" to the clinic?* The opinions expressed regarding this were fairly evenly divided. Some stated that, especially during the past two years, patients come willingly while others said that considerable persuasion is required, and many have to be "dragged" in or deceived. Parents can aid or hinder the worker in her efforts. The older boys and girls object to coming to the clinic because they are afraid that they will be taken away from their homes. One nurse stated "I am afraid that sometimes we are not entirely honest with the patient and do not tell him that he is to go to a psychiatric clinic, but rather it is suggested that he go to see a 'nerve doctor' who may be able to help him. We have found in the past that the average patient will accept this suggestion but will rebel against going to a clinic which in any way has the word 'mental' attached to it." Another wrote "After the nature of the clinic is fully understood and the patient realizes that he isn't considered 'crazy' because he attends the clinic, there is very little reluctance in attending." A county judge wrote "There has been very little 'dragging' persons to the clinic because those interested have been very tactful and careful not to build up antagonism toward the clinic."

QUESTION TEN. *What is your opinion of the results obtained by means of the mental hygiene clinics? Frankly criticize this point. What improvements have you to suggest?* This question brought out many criticisms, suggestions and praise of the mental hygiene clinics. The clinics are appreciated and have been of great value to all the communities. Some informants have stated that they did not know what they would do without them. Some others have expressed the criticism that the clinics try to handle too many cases on each clinic day and that the clinics should be held more often and more time given to each case in order to adequately recommend methods of handling the case. They feel that the psychiatrist makes too hasty recommendations and takes too much for granted. They believe that the psychiatrist should know more about each community and the methods available for teaching and caring for children and adults. In some cases, the opinion is that the psychiatrist's recommendations are too vague or are impossible to carry out due to the lack of certain facilities in the town or city. Several realize the incompleteness of the histories which are obtained

and they make the excuse that the nurse and social workers do not know enough about mental hygiene and the information required by the psychiatrist and, because of this, they recommend further lectures similar to those given two years ago under the direction of the State Department of Mental Hygiene. The following are a few of the more important answers to this question. A nurse stated, "Results excellent when a good history is obtained and when the psychiatrist's suggestions are in line with the resources of the community. No good to recommend an ungraded class for the feeble-minded when no class available. This does not solve the school's problem." Another wrote, "Helpful. Sometimes suggestions not followed as they sound fine on paper but not practical. Can't always find a boarding home at the public's expense." Still another wrote, "I feel that I am not getting the assistance I need and that I am unable to help parents much. Suggestions seem impossible to carry out. More simple recommendations."

A judge stated as follows: "The results obtained by means of the mental hygiene clinics have been very great. The realization that mental defectiveness and mental diseases can be treated scientifically by physicians of the mind is the most important result. The knowledge that such persons must have a special treatment and training furnished only in hospitals and schools makes the patients and their families more willing to take advantage of those institutions. The old prejudice and fear of hospitalization and commitment is gradually breaking down. The psychiatrists coming to the clinics from the State schools and hospitals create a connecting link that is very helpful to the families and their members who become actual residents of the institutions. The after-care of the patients in their homes is one of the most practical and efficient features of the service. My only recommendation is that more psychiatrists and nurses be employed so that a greater volume of the work can be carried on more efficiently. Humans know so little about their minds, their functions, and how to take care of them, that it seems that the work has only begun."

A director of nurses makes the following suggestions. "1. Separate parole and guidance clinics. 2. Work out an appointment system which works. 3. Send a complete report to physician and to the person who is to do the follow-up. 4. Discuss extreme cases with the follow-up worker personally before follow-up is done. 5. Limit the number of appointments in a day. 6. Have more frequent clinics. 7. Demand complete histories. 8. Inform referring agent why a satisfactory report cannot be made. 9. Conserve the time of professional workers by taking patients at the appointed time."

SUMMARY

Ten questions pertaining to mental hygiene and to mental hygiene clinics were included in a questionnaire, a copy of which was sent to a total of 50 judges, social workers, nurses, probation officers and welfare workers. A surprisingly large percentage (92 per cent) were completed and returned. They contain praise of the efforts and of the apparent benefits which have been obtained through the work of the psychiatrists by their lectures and by their work at the mental hygiene clinics. It is believed that the subject of mental hygiene and the benefits which can be derived from its knowledge is little known except by the more intelligent citizens and by certain agencies which try to apply its principles. They imply that there is still a halo of mystery surrounding anything which pertains to mental health and that mental ill health is still considered a disgrace. They frankly state that if further knowledge in mental hygiene is to be given, it must be given in a tactful manner and in simple terms. The term mental hygiene seems to be a confusing term to the average person. The word mental attached to another term creates a fear within many persons.

Another important fact noted is that parents seldom refer their relatives to the psychiatrist. The greater number of persons with a mental illness are discovered in the schools, courts or in the homes by teachers, judges and nurses.

According to a number of opinions, the chief services expected of the psychiatrist are mental testing and recommendation for institutionalization. Referring persons or agencies expect very simple solutions to problems which have been long standing and which have already exasperated the agency referring the patient to the psychiatrist. They expect, as some have stated, that a miracle be performed.

Question six has brought out the fact that the advice given by the psychiatrist, unless it is a recommendation that the patient be institutionalized, is poorly handled through follow-up work and is left to slide along with the hope that everything will end satisfactorily. In other words, it emphasizes the deficiency of the present follow-up system and the need of a psychiatric social worker in each large community.

The average parent is still hesitant about sending his relative to a mental clinic and fear of or antagonism toward the clinic must be conquered before he will allow this to be done. Some individuals still call it a "crazy" clinic. However, the information regarding mental hygiene, which has been given out during the past few years, has had generally encouraging effects.

The impression is that most of those individuals who are mentally ill do not appreciate their condition and have no objections to visiting the clinic,

particularly after the first visit. Some who do recognize their illness are at first very hesitant, while others seek advice. Many are afraid they will be called "crazy" if they attend the clinic.

Generally it is quite difficult to persuade individuals to attend the clinics and in some cases they have to be "dragged." However, the term "dragged" used in question nine was apparently not a good one because it was misinterpreted by some who stated that they never dragged patients to the clinic, but preferred to say that the nature of the clinic was disguised by them in such a way that the person did not know the real nature of the clinic, and that in some cases even deception was used.

The last question yielded many helpful ideas. The majority of the opinions expressed are to the effect that the mental hygiene clinics are worthwhile and are actually necessary to all communities but that there are many things about them which could be improved. It is felt that the clinics are overcrowded and, because of this, should be held more often; that the psychiatrists cannot adequately consider each case, and often make recommendations which cannot be carried out in each community because of the lack of proper facilities for teaching and caring for children and adults. Generally recognized are: the need for further instruction in the practice and principles of mental hygiene and a more extensive discussion of the important data of each case, which must be furnished to the psychiatrist before he can adequately give constructive suggestions.

The above information, obtained by means of a questionnaire, has, I believe, yielded several important constructive ideas which can be used for the improvement of the mental hygiene clinics and for the advancement of the mental hygiene program in the State.

AN INFORMATIVE LETTER CONCERNING THE RETIREMENT LAW

STATE OF NEW YORK
DEPARTMENT OF LAW
ALBANY

May 19, 1936

In re: E. J.

Retirement Board,
State Hospital System,
Department of Audit and Control,
Office Building,
Albany, New York
Attention Miss Elizabeth F. Cavanaugh,
Secretary

Gentlemen:

I have your letter of May 5, in which you set forth the situation of the above named employee of the Central Islip State Hospital, relating to his retirement under the provisions of Article VIII of the Mental Hygiene Law.

It appears that this employee was retired as of October 1, 1926, under the then provisions of the State Hospital Retirement System, on account of ordinary physical disability. He remained on retirement for a period of one year and returned to service on October 1, 1927. If he remains in service until May 12, 1936, he will have completed twenty-four years of actual service in the State Hospital System, exclusive of the one year period that he was on retirement.

In his present application for service retirement, the employee contends that the one year period during which he was retired should be credited to him in order that he may have the required twenty-five years of service as of May 12, 1936, to qualify him for retirement under Section 172 of the Mental Hygiene Law. His contention is based on a ruling in Circular No. 1968, issued by the Department of Mental Hygiene under date of June 4, 1927, paragraph 7, of which would appear to lend support to his contention.

I have communicated with the Commissioner of Mental Hygiene, and under date of May 12, 1936, the Commissioner advises that Circular No. 1968 relates solely to service credits in connection with the wage increase provisions of Section 61 of the Mental Hygiene Law, and was intended to have absolutely no reference to the State Hospital Retirement System.

Under Section 172, officers or employees of the New York State Hospital System for the care of the insane are entitled to retirement when they shall have faithfully and honestly discharged their duty for twenty-five years. In my opinion, the employee in question will attain to a retirement status under this section as of May 12, 1937, if he continues in service until that date, since he was not discharging his duty during the period of the year during which he was on retirement.

Very truly yours,

JOHN J. BENNETT, JR.,
Attorney-General.

NEWS AND COMMENT

—The eleventh International Congress on Psychology will be held in Madrid, September 6-12. Information may be obtained by writing to the Instituto Nacional de Psicoteenia, Alberto Aguilera, 25, Madrid.

—The fifteenth annual clinical and scientific session of the American Congress of Physical Therapy will be held at the Waldorf-Astoria Hotel in New York City, from September 7 to 11. The educational aspects of physical therapy and the relationship of physical therapy technicians to physicians and hospital departments will be dealt with. Communications should be addressed to Dr. Norman E. Titus, 730 Fifth Avenue, New York, regional secretary for the eastern section.

—The fourth congress of the Association pour la Documentation Photographique et Cinématographique dans les Sciences will be held October 9 to 15, this year, at the Musée Pédagogique de l'Etat, in Paris. Persons interested in making contributions to this congress, should communicate as soon as possible with M. Docteur Claqué, 39, rue Scheffer, Paris, 16°, advising him of the title and form of their contributions, as well as approximate duration of projection. The materials themselves should be directed to "Secretariat du Congrès, Musée Pédagogique de l'Etat, 29 rue d'Ulm, Paris, 5°," and should reach him no later than October 1.

—On July 9, Governor Herbert H. Lehman attended and made the opening address at the exercises in connection with the dedication of the Homer Folks Tuberculosis Hospital at Oneonta. Dr. Thomas Parran, Jr., Surgeon-General of the United States Public Health Service, under whose administration as New York State Health Commissioner, the Homer Folks and two other new State tuberculosis hospitals were begun, was also present. The Hon. Homer Folks, in whose honor the new hospital is named, by special act of the last Legislature, in recognition of his accomplishments in tuberculosis control, was guest of honor. The ceremonies were considered to have the highest significance in the history of tuberculosis control in New York State.

—The knowledge that deafness is present and that it is incurable ordinarily comes with the force of a major calamity. Something positive in the way of help must be offered if the individual is not to spend desperate years in a bewildered effort to adjust himself. With the money he received as a prize for inventing the telephone, Alexander Graham Bell founded the

Volta Bureau. This agency gives advice on schools for the deaf and hard-of-hearing, preschool training, lip reading instruction, hearing aids, social contacts and psychological difficulties. While it is not equipped to offer employment service, it gives information with regard to fields of activity that are open to the deaf and the hard-of-hearing. Pamphlets dealing with all phases of deafness except medical problems are available to all who ask for them. Lists of such pamphlets and sample copies of the magazine, *The Volta Review*, will gladly be sent free of charge. The Volta Bureau is located at 1537 35th Street, N. W., Washington, D. C.

Civil Service Eligible Lists for Positions in the Department of Mental Hygiene

Child Guidance Psychiatrist. Promotion. List Established December 28, 1935

Dr. Donald W. Cohen, Prov. State Office Building, Department of Mental Hygiene, Albany.

Dr. Marion Collins, 24 Church St., Hagsman, N. Y.

Medical and Statistical Clerk (with ability as typist). List Established January 14, 1936

Florence Deutsch, 811 Cauldwell Ave., Bronx, N. Y.

Clara Traktman, 681 Franklin Ave., Brooklyn, N. Y.

Mary G. Eisert, Helmuth, N. Y.

Junith Been, 2413 82nd St., Brooklyn, N. Y.

Elizabeth G. Callanan, 107 Ashland Ave., Buffalo, N. Y.

James W. Hazlett, Marcy State Hospital, Marcy, N. Y.

Mrs. Alice D. H. Schmidt, 551 Bronx River Road, Yonkers, N. Y.

William E. Patchen, Willard State Hospital, Willard, N. Y.

Elizabeth A. Van Horn, Alfred Station, N. Y.

Louise M. Clark, 919 State Street., Utica, N. Y.

Jane A. Fitzpatrick, 334 State St., Albany, N. Y.

Albert Garcia, Rome State School, Rome, N. Y.

Elizabeth E. Groff, 514 W. Thomas St., Rome, N. Y.

Helen L. Cragg, 115 Winthrop St., Watertown, N. Y.

Gertrude E. Murray, 81 George St., Green Island, N. Y.

Margaret L. Welcher, 319 West Miller St., Newark, N. Y.

Verna K. Krakowka, 535 Westcott St., Syracuse, N. Y.

Senior Stenographer. Promotion. List Established January 24, 1936

Mrs. Emily M. Riley (Prov.), 1814 6th Ave., Watervliet, N. Y.

Alice F. Doran, 55 Walter St., Albany, N. Y.

Claire A. Bailey, 71 Washington Ave., Cohoes, N. Y.

Dorothy Grodzansky, Nassau, N. Y.

Dentist. List Established February 10, 1936

Raymond D. Brough, 800 South Wilbur Ave., Syracuse, N. Y.

George B. Mitchell, 868 Main St., Buffalo, N. Y.

Robert A. Hoke, Jr., Matteawan State Hospital, Beacon, N. Y.

J. Brayton Lewis, Kings Park State Hospital, Kings Park, N. Y.

Charles F. McDonald, State School, Wassaie, N. Y.

William E. Pendergast, Box 45, Wingdale, N. Y.

Thomas H. Jelley, 529 Church St., Newark, N. Y.

Harry Mintzer, St. Lawrence State Hospital, Ogdensburg, N. Y.

George Goldstein, Box 24, State School, Orange Co., N. Y.

Max Frumkes, 660 E. 116th St., New York City.

Glen W. Carlson, 1600 South Ave., Rochester, N. Y.

Simon Klein, Manhattan State Hospital, Ward's Island, N. Y.

Bennett M. Lathrop, Letchworth Village, Thiells, N. Y.

Charles C. Rizzo, 54 Main St., Mt. Morris, N. Y.

Walter L. Trudeau, Kings Park State Hospital, Kings Park, N. Y.

Francis E. Byrne (Prov.), Creedmoor State Hospital, Queens Village, N. Y.

Cameron E. Carpenter, Rockland State Hospital, Orangeburg, N. Y.

Senior Dentist. Promotion. List Established April 13, 1936

Robert G. Parr, Central Islip State Hospital, Central Islip, N. Y.

**Contracts Awarded by the Commissioner from January 1 to
June 30, 1936**

January 10.

For water supply (Contract No. 3), Hudson River State Hospital, to George A. Eveline, Troy, N. Y., for \$2,297.25.

January 16.

For interior painting, buildings Nos. 2, 3, 4, 5, etc., Craig Colony, specification No. 8837, to the Ronnoco Painting Company, Inc., New York City, for \$4,874.

January 17.

For heating work, power house equipment, Brooklyn State Hospital, specification No. 8547, to the Astoria Heating Company, Woodside, Long Island, N. Y., for \$1,690.

January 20.

For miscellaneous work, Rockland State Hospital, specification No. 8815, to the Rademacher Bros., Inc., Buffalo, N. Y., for \$2,263.

January 22.

For lightning conduct, building No. 58, Wassaic State School, specification No. 8820, to Radenmacher Bros., Inc., Buffalo, N. Y., for \$95.

January 22.

For copper gutters and snow guards on roof of assembly hall, Syracuse State School, specification No. 8792, to Joseph Cashier & Co., Inc., Syracuse, N. Y., for \$160.

January 23.

For miscellaneous construction work, Kings Park State Hospital, specification No. 8778, to the Highland Contracting Company, Inc., Brooklyn, N. Y., for \$12,839.

January 27.

For construction work, children's building (building S) and tunnels, Rome State School, specification No. 8558, to A. E. Stephens Company, Springfield, Mass., for \$249,900.

For heating work, children's building (building S) and tunnels, Rome State School, specification No. 8559, to H. J. Brandeles Corp., Utica, N. Y., for \$33,590.

For sanitary work, children's building (building S) and tunnels, Rome State School, specification No. 8560, to R. T. Frye & Company, New York City, for \$26,227.

For electric work, children's building (building S) and tunnels, Rome State School, specification No. 8561, to Fischbach & Moore, Inc., Albany, N. Y., for \$10,930.

January 29.

For interior painting, employees' building No. 36, Newark State School, specification No. 8841, to the National Brush-Painting and Spray Painting Corp., Buffalo, N. Y., for \$967.

For miscellaneous iron work, building No. 10, Brooklyn State Hospital, specification No. 8851, to the Alton Iron Works, Inc., New York City, for \$220.

February 3.

For replacement of wood doors, buildings Nos. 12, 19, 20 and 21, Creedmoor State Hospital, specification No. 8861, to the Washbourne Reconditioning Company, New York City, for \$8,470.

February 10.

For interior painting, Wassaic State School, specification No. 8862, to the Vasillaros Contracting Company, New York City, for \$3,100.

February 14.

For sewers and water lines, staff accommodations, Middletown State Hospital, to George A. Eveline, Troy, N. Y., for \$5,001.50.

February 27.

For repairs to trestle, Binghamton State Hospital, specification No. 8748, to the Mutual Construction Company, Brooklyn, N. Y., for \$1,250.

March 2.

For construction work, assembly hall and service connections, Harlem Valley State Hospital, specification No. 8867, to DeRiso Bros., Inc., West New York, N. J., for \$167,940.

For heating work, assembly hall and service connections, Harlem Valley State Hospital, specification No. 8868, to the Dierks Heating Company, Inc., New York City, for \$26,512.

For sanitary work, assembly hall and service connections, Harlem Valley State Hospital, specification No. 8869, to Barr & Creelman Engineers and Contractors Corp., Rochester, N. Y., for \$8,775.

For electric work, assembly hall and service connections, Harlem Valley State Hospital, specification No. 8870, to Fischbach & Moore, Inc., New York City, for \$14,400.

For special electric fixtures, assembly hall and service connections, Harlem Valley State Hospital, specification No. 8871, to The Simes Company, Inc., New York City, for \$232.

March 5.

For miscellaneous additional work, Craig Colony, specification No. 8818, to the Mutual Construction Company, Brooklyn, N. Y., for \$3,777.

March 6.

For replacing three fire escapes, Kings Park State Hospital, specification No. 8872, to the Gottlieb Iron Works, Inc., Brooklyn, N. Y., for \$4,979.

March 19.

For construction and electric work, fire protection, Binghamton State Hospital, specification No. 8902, to the Alpha Contracting Corporation, New York City, for \$16,470.

March 23.

For sewers and water lines in connection with children's building (building S), Rome State School, to Bruno Trimpoli, Schenectady, N. Y., for \$7,445.

March 24.

For construction work, storage for automobiles, Pilgrim State Hospital, specification No. 8848, to the Plack Construction Corporation, Ithaca, N. Y., for \$11,453.

March 24.

For heating work, storage for automobiles, Pilgrim State Hospital, specification No. 8849, to the Astoria Heating Company, Woodside, N. Y., for \$1,182.

For electric work, storage for automobiles, Pilgrim State Hospital, specification No. 8850, to Charles A. Mulligan, Central Islip, N. Y., for \$745.

April 10.

For insect screens, Letchworth Village, specification No. 8911, to the Royal Weatherstrip & Screen Company, Inc., Laurelton, N. Y., for \$239.

April 11.

For construction work, chapel lightning conductor, Craig Colony, specification No. 8938, to the Boston Lightning Rod Company, Boston, Mass., for \$175.

April 13.

For insect screens, Craig Colony, specification No. 8909, to the Orange Screen Company, Maplewood, N. J., for \$2,280.

April 20.

For insect screens, assembly hall, non-medical officers' buildings, nurses' home, administration building, etc., Rockland State Hospital, specification No. 8905, to the Orange Screen Company, Maplewood, N. J., for \$3,400.

For insect screens, Kings Park State Hospital, specification No. 8910, to the Watson Manufacturing Company, Jamestown, N. Y., for \$9,879.

May 11.

For insect screens, Gowanda State Hospital, specification No. 8944, to the Watson Manufacturing Company, Inc., Jamestown, N. Y., for \$19,274.

May 19.

For repairs to power house stack, Craig Colony, specification No. 8956, to the William Summerhays Sons Corporation, Rochester, N. Y., for \$830.

May 25.

For insect screens, building No. 10, Brooklyn State Hospital, specification No. 8934, to the Royal Weatherstrip & Screen Company, Inc., Laurelton, N. Y., for \$6,875.

May 26.

For insect screens, Wassaic State School, specification No. 8912, to the Royal Weatherstrip & Screen Company, Inc., Laurelton, N. Y., for \$14,880.

June 1.

For sewers and water lines, assembly hall, Brooklyn State Hospital, to the J. F. Dunn Company, Inc., Central Islip, N. Y., for \$1,632.

June 2.

For construction work, development and construction of farm colony, including farm buildings and service connections, Newark State School, specification No. 8805, to the Anthony Link's Sons, Rochester, N. Y., for \$41,222.

For sanitary work, development and construction of farm colony, including farm buildings and service connections, Newark State School, specification No. 8807, to Fred S. Conkling, Rochester, N. Y., for \$1,384.

For electric work, development and construction of farm colony, including farm buildings and service connections, Newark State School, specification No. 8808, to the Morrison Electric Company, Rochester, N. Y., for \$737.

June 10.

For insulation in attics, building No. 63, Pilgrim State Hospital, specification No. 8963, to the Lynn Construction Company, Inc., New York City, for \$1,595.

June 17.

For insulation in attics, buildings Nos. 45, 46, 47, 48, 49 and 50, Utica State Hospital, specification No. 8984, to the Rock Wool Insulation Corporation, Utica, N. Y., for \$553.48.

June 22.

For sewage disposal (Contract No. 2), Rockland State Hospital, to the F. H. McGraw & Company, Inc., New York City, for \$149,649.25.

For interior painting, buildings Nos. 33, 34 and 35, Newark State School, specification No. 8986, to the Alliance Building Renovating Company, New York City, for \$6,190.

June 23.

For construction work, assembly hall extension, Harlem Valley State Hospital, specification No. 8985, to DeRiso Bros., Inc., West New York, N. J., for \$7,640.

June 26.

For sewers and water lines, assembly hall, Pilgrim State Hospital, to the J. F. Dunn Company, Inc., Central Islip, N. Y., for \$6,920.50.

For sewers and water lines, industrial building, propagating house, truck storage, etc., Pilgrim State Hospital, to the J. F. Dunn Company, Inc., Central Islip, N. Y., for \$3,996.53.

June 30.

For sewage disposal and water supply, Marey State Hospital, to the O'Connell Electric Company, Rochester, N. Y., for \$155,459.50.

For sewers and water lines, assembly hall, Harlem Valley State Hospital, to Joseph L. Cuzzo, Yonkers, N. Y., for \$3,577.50.

NEWS OF THE STATE INSTITUTIONS FOR THE HALF-YEAR PERIOD FROM JANUARY 1, 1936 TO JUNE 30, 1936

STATE HOSPITALS

BINGHAMTON

Ten remade radios have been installed on wards in the main building, north, south and west buildings, Edgewood and Broadmoor.

Contract has been completed for rewiring of wards 7, 10 and 14, and dining room, kitchen and dormitory of ward 7.

Work has begun on the contract for installing fire escapes at west building, Edgewood, ward 6, main building and assembly hall, and fireproofing stairways of north building, Edgewood and Woodlawn.

The work of converting the former stenographers' office in the main building into a steward's office has been completed and the steward's force of employees now occupy the new suite of offices.

The new concrete intake in the Susquehanna River at the hospital water works has been completed.

The bank along the railroad at Plymouth Rock farm has been cut down in order to obtain a clearer view of approaching trains.

The work of repairing a trestle over the railroad tracks at the power plant has been completed.

Fifty-four thousand feet of lumber was cut from timber on the hill back of Orchard House cottage.

Eighty-five new cement slabs have been fabricated for greenhouse tables.

A new concrete shuffle board has been completed, for the use of patients at Broadmoor.

BROOKLYN

W. P. A. project No. 501 has continued in operation at this hospital during the first six months of this year.

A four-foot walk in front of the east, west and reception buildings, extending about 1,400 feet, has been widened by the addition of a new four-foot walk immediately parallel.

On January 13 the operating room was moved from the reception building to the eleventh floor of building No. 10. The old operating room has been remodeled to serve as a beauty parlor.

Extensive changes have been made in the Hugo Hirsch building, involving the enlargement of clerical offices and the construction of a new office for

the steward. The appearance of the reception room has been materially altered through modernization.

A considerable amount of curb has been laid about the various roadways, and a new service road is being constructed leading to the west side of building No. 10; this road will replace the service road constructed last fall, which must now be removed to make room for the foundation of the proposed wing to this building.

On January 30, excavation was begun for the new assembly hall. By June 30, the construction of this building was about 40 per cent complete.

On January 27, the seventh and ninth floors of building No. 10 were occupied; on February 27, the fourth floor was occupied; and on April 16, the third and fifth floors, which were the only ones left unoccupied, were placed in service. This building lends itself admirably to the care and treatment of medical and surgical cases. The census of the building on June 30 was: 692 (337 male and 355 female patients), of which number 452 (199 male and 253 female patients) were in bed.

The superintendent's apartment in building No. 10 was occupied on January 30. On April 10 the installation of X-ray equipment in this building was completed.

The contract for replacing doors in buildings Nos. 6, 8, 9 and 10 was practically completed at the end of the fiscal year.

During the last week in June the work of excavating was begun along the north wall of the power house, preparatory to placing the foundations for the new incinerator building.

BUFFALO

A six-foot wire fence, 2,300 feet long, was erected on the north side of the hospital property.

A small brick building formerly used as a tool house has been remodeled, and lockers, shower and toilet facilities arranged so that employees in the farm and grounds service now have a satisfactory place in which to clean up and store their working clothes when going off duty.

CENTRAL ISLIP

The contract for additional water supply was completed in March.

Construction of a brick and concrete grandstand on the athletic field, with a seating capacity of 900, was completed in June.

The W. P. A. project for new tile floors in the six dining rooms of group S has been completed.

CREEDMOOR

The contract for construction of the new assembly hall has advanced to 89 per cent of completion. Other contracts on this building are completed as follows: sanitary, 65 per cent; heating, 90 per cent; electrical, 91 per cent.

The new driven well contract is reported 88 per cent completed and the sewer and water lines contract for the assembly hall was finished in June.

A portable night watchman's clock system was put in operation and electric clocks were installed throughout the institution and are now running satisfactorily.

A new occupational therapy room was opened in the basement of building P.

Partially through W. P. A. labor, the interiors of employees' buildings I and H were painted.

Because of the severe winter, several W. P. A. projects could make little advance. The status of the major ones, as of June 30, follows:

Repair of brick walls, buildings R and S, kitchens A and N..	55
Replastering of interiors, buildings O and P	100
Screens for laundry windows	25
Concrete service tunnels to replace Johns-Mansville conduit—	
614½ feet of tunnel construction	18
Painting of porch guards, buildings O and P	95

Roads and walks: 681 lineal feet of concrete sidewalk has been laid. Considerable excavation, grading and placing of forms done for sidewalks, especially north of building L and south of building N.

Painting of woodwork, covered passageways complete.

W. P. A. labor also aided us during the winter in removal of snow, spreading of sand on icy roads, repairs to linoleum and repairs to furniture, and since frost was out of the ground grading has been done south of building N, about two cottages, etc. The interior of the power house has also been painted.

GOWANDA

During the last six-month period 15 of the 16 new buildings have been placed in service. Due to the fact that surgical equipment has not been completely furnished, the surgical unit is not yet occupied.

Beginning February 17 and extending to April 10, some 400 men and 300 women patients were transferred from the Buffalo State Hospital to this institution. The new reception service was placed in commission early in February.

In February physicians and employees occupied their new quarters. Building No. 72, for single female employees, was named Arthur Hall, after

Dr. Daniel H. Arthur, a former superintendent. Building No. 73, for single male employees, was named Larmouth Hall, after Mrs. Laura K. Larmouth, formerly a member of the board of managers. Building No. 74, for married employees, was named Perkins Hall, after Dr. Anne E. Perkins, for many years a physician at this hospital. The old nurses' home was named Carpenter Hall, after Miss Olive A. Carpenter, former matron.

Ward 19 in the administration building was converted into an enlarged sewing room.

W. P. A. project No. 42430 is about 50 per cent completed. This consists of construction of approximately two and one-half miles of road.

Construction work under W. P. A. project No. 43464 has accomplished noteworthy progress. This involves many small but important features in connection with the reforestation project on the reservoir watershed: trimming of undergrowth; developing roads and walks; providing drainage system and fire lanes in the wood lots west of the main buildings; grading and seeding; and replacement of protecting fence about the ice ponds.

The contract for laying a pipe line from the reservoir to the new power house is approximately 95 per cent completed.

HARLEM VALLEY

A new cafeteria for employees was completed in building C.

The new library for patients, located in the administration building, was opened in April.

Ground was broken on April 20, for the new assembly hall. This work is progressing satisfactorily under W. P. A.

HUDSON RIVER

The construction of two water supply tanks has been completed, each with a capacity of 1,000,000 gallons.

A W. P. A. project for the removal of earth in the rear of one of our new buildings at the cottage department has been in operation, and is about 25 per cent completed.

A new hard surface road has been completed around Hillcrest.

New water lines have been installed at Lakeview.

KINGS PARK

The old storehouse was abandoned during the month of March, and the new storehouse put to full use.

Cafeteria service was installed in the employees' dining room at group I, in March.

The following contract work is in progress:

Four artesian wells.

Sewage disposal plant.

Installing screens on new continued treatment building.

The following work has been done with the aid of W. P. A. funds:

Installation of curbing on new section of the boulevard.

Painting of wards 85 and 86; exterior painting of cottages 1, 2, 3, 4 and 5.

Installation of copper leaders and gutters to same cottages.

Repair of cornices to building B.

Cottage 33 (the old laundry building) was abandoned and razed on April 16.

MARCY

The W. P. A. project for the development of lawns is 30 per cent completed.

The W. P. A. project for renewal of the domestic hot water lines is 98 per cent completed.

The W. P. A. project for painting of ceilings and walls in buildings C and D is about 48 per cent completed.

On April 1, cafeteria service was instituted in the patients' dining room in building A.

A new diet kitchen has been constructed in building A, providing adequate facilities for special diets in this building.

On April 21, the occupational therapy department moved from its quarters in the industrial building to new quarters in the west group dining room. The new quarters are much lighter and are more accessible to the ward buildings. In winter and in inclement weather, patients will be able to reach it through tunnels.

An arch has been constructed between wards E-50 and E-51 and also between wards E-52 and E-53. These arches will permit both day rooms to be viewed from either ward and thus will conserve help in this building.

A softball diamond was constructed at the rear of the employees' tennis court.

A tennis court for the use of the staff has been constructed at the rear of the employees' tennis court.

Ten cement hot beds were constructed at the propagation house, most of the labor being provided by the W. P. A.

MIDDLETOWN

Work is progressing rapidly on five staff cottages, and it is anticipated that they will be ready for occupancy in September.

One hundred male patients were received by transfer from the Rockland State Hospital, January 9; another hundred male patients were received from the Rockland State Hospital on May 12, and on June 9, 50 men and 50 women patients were received on transfer from the same institution. This increases the hospital population to 3,475, including patients on parole and boarding out.

The boarding out of patients is progressing rapidly and we now have 86 patients out in boarding homes. Many of these are located in the neighborhood of the hospital, but the largest center has been established at Shavertown, Delaware County; there are between 40 and 50 patients boarding out in this community and in neighboring towns. The establishment of a community center for patients in this town is anticipated.

PILGRIM

The following buildings were occupied on the dates indicated:

Home No. 55, for married employees—January 27

Home No. 56, for married employees—March 3

Building No. 25, nine-story infirmary—March 24

The following group transfers of patients were received from the Manhattan State Hospital, on the dates indicated:

75	ambulatory, male	January 7
75	infirm, male	February 11
75	infirm, female	February 25
100	male	March 10
75	female	March 24
100	infirm, male	April 7
75	infirm, female	April 21
100	infirm, male	May 5
75	infirm, female	May 19
100	infirm, male	June 2
83	infirm, female	June 16
41	infirm, male	June 30

ROCHESTER

The new assembly hall was formally opened on January 6. This is a modern building, having a seating capacity of about one thousand, and is provided with all the features necessary for moving pictures and the proper stage equipment for entertainments. Probably later on, it will be used

also for basketball and other appropriate athletic activities. The basement has provisions for an employees' club, hospital store, bowling alleys, billiard room. The occasion for the opening was an employees' dance to which all former employees were invited, particularly those belonging to the employees' association.

On January 25, a basement ward in the Monroe building, having a rated capacity of 38 patients, was discontinued as a part of the hospital accommodations.

A special diet kitchen with modern equipment was placed in operation on June 1, and began with the preparation of about 25 special diets daily. It will also be used for teaching purposes.

In the early part of May, a new steel flagpole was erected adjacent to the new administration building.

Last fall a W. P. A. project was begun for grading and building roads and sidewalks. Weather conditions seriously interfered with this work, which was resumed in the early spring, and is now progressing satisfactorily.

ROCKLAND

Since January 1, the following buildings which were under construction have been completed and occupied: assembly hall, children's group of buildings, home for unmarried nurses, and the non-medical staff house. The new infirmary building, home for single female employees and home for married employees remain about 99.5 per cent complete, due to incompleteness of lighting features, and to the changes of some exceptions made by the Department of Public Works.

The children's group consists of 6 cottages, 3 for boys and 3 for girls, and assembly hall, administration building, kitchens and dining rooms, all connected by corridors. On May 25 this group was opened by transferring 11 children from the wards of the hospital to one of the cottages. At present two cottages are in use, one for boys and one for girls.

Sound and projection equipment was installed in the assembly hall and the first motion pictures shown on May 21. Arrangements have been made to show pictures every Thursday afternoon and evening. In this way, approximately 1,500 patients can attend this entertainment.

With patient help, W. P. A. projects on concrete walks, new roadways and grading and seeding have progressed favorably. Also, a large plaza for the parking of automobiles and busses has been made back of the assembly hall.

UTICA

New staff accommodations consisting of six frame cottages being constructed under contract are approximately 95 per cent completed.

Repairs to sections of the roof of the main building have been completed with an appropriation of \$1,800 under "Special Repairs."

Allotments for W. P. A. work projects have been completed as follows:

Scraping and painting metal roofs	\$1,223 00
Pointing brick masonry walls	3,015 00
Repairs to roofs, hospital buildings	4,747 00

A new gravel road to the new staff accommodations is approximately 75 per cent completed.

An underground telephone cable to service the staff cottages has been installed by hospital mechanics. Window screens for these buildings have been made by the hospital carpenters.

A new Buick ambulance has been purchased; also a Prosperity pressing machine for use in the tailor shop.

WILLARD

The contract for the construction of a sewage disposal plant is 82.8 per cent completed.

The W. P. A. project for curbs and gutters over a distance of 1,800 feet has gone ahead, and it is proposed to complete the road with an asphalt top. A ditch is being dug at the rear of Pines and Edgemere buildings to take care of the large amounts of surface water, which have in the past caused considerable damage during heavy rains.

A 12-car garage is now complete except for windows and doors. Windows and window frames are being repaired at Pines and Edgemere buildings. These two improvements are also W. P. A. projects.

STATE INSTITUTIONS

CRAIG COLONY

For a number of years, there has been discussion in reference to altering the subway through which the State highway passes beneath the Pennsylvania Railroad at Sonyea. Contract was awarded some months ago, and the work has now begun on the building of a new subway several hundred feet south of the present one. When work on this contract is completed, it is quite obvious that motorists will increase their speed on the State highway passing through the colony.

The dredging of Kishaqua Creek from the Dansville and Mount Morris railroad bridge to the north line of colony premises on the east bank of this creek, has been completed, as well as the work on the new sewage disposal plant.

LETCWORTH VILLAGE

Display cases, shelves and background frames have been erected in the research department, for the exhibition of specimens, charts, and other features.

The new industrial building was formally opened in February. In this building are taught tapestry and patterned weaving, tapestry needlework, braided and braidweave rugs, bookbinding, designing, drawing, painting, table loom weaving, needlework and dressmaking.

Two new stone buildings have been erected at the piggery.

A new concrete road from the female infirm group to the chicken farm, and a parking space in the male infirm group, have been constructed.

A recreation class has been established in Iota cottage which is a cottage for low-grade, infirm boys. This class consists of about 16 children most of whom are under 10 years of age. They seem to be quite happy and very much interested in their new class.

NEWARK

The construction contract for the new employees' building, south dormitory, and hospital and infirmary building has been completed. The electrical and heating contracts on all these buildings are virtually completed. The sanitary work stands as follows: employees' building, completed; south dormitory, approximately 80 per cent complete and hospital and infirmary building, about 60 per cent complete.

Nearly all the W. P. A. projects are still under way, but not so fast as at first for the reason that a great many men assigned to this work have secured employment elsewhere, which is to be expected at this time of the year.

Water chlorinating apparatus has been purchased and installed.

A house and lot on Church Street immediately west of the lot in which the warehouse is located was purchased from the Minnie E. Watson estate.

A dry tumbler and a combination shirt and collar press have been ordered for the laundry, under a special appropriation made by the last Legislature.

A considerable amount of grading has been done around the boys' buildings on a W. P. A. project. Another W. P. A. project has been approved

for filling in the refuse dump in the vicinity of the new hospital in the boys' group; grading, and placing of cinder walks and running track on the school athletic field; and placing the athletic field in general good condition.

The wood-working shop in the occupational therapy department was moved from the west to the east dormitory and necessary wiring done in connection with the installation of the machinery.

SYRACUSE

A new tinsmith and paint shop is being erected which will be of fireproof construction. The building will be of cement blocks which were made by the mason's department.

In order to insure fire protection at our farm colonies, 250 feet of two and one-half-inch hose has been placed at five of the colonies in small detached houses, so that the hose is readily accessible.

WASSAIC

The new school building was opened on January 7, when the winter term began. The new five-story hospital building was opened on June 15.

The shoe repair shop has been moved from the first floor of the vegetable cellar to the industrial department of the new school building.

The employees' club, which was temporarily housed in one of the employees' homes, was moved to the quarters provided for it in the new school building. A soda fountain and bowling alley have been installed there, and furniture has been purchased.

The house formerly occupied by the superintendent has been renovated and is now occupied by the first assistant physician and his family.

An electric incubator and electric brooder have been installed in the poultry plant.

Grading work has continued and during the spring about 150 trees were set out about the grounds.

W. P. A. projects have made possible several improvements: excavating and placing stone base for parking spaces, construction of a wagon shed at the horse barn, preparations for a road at the rear of the new school.

Satisfactory progress has been made on the contract for the new married employees' home.

NOTEWORTHY OCCURRENCES

STATE HOSPITALS

BINGHAMTON

William T. Ryan, attendant, died January 1, 1936, of chronic myocarditis.

Thomas H. Hamilton, special attendant policeman, died January 6, 1936, of heart disease.

Gustave Gerrer, supervisor at Broadmoor, died May 29, 1936, of heart disease.

Mr. Lee R. Harrison of Greene, N. Y., was appointed as a member of the board of visitors by Governor Herbert H. Lehman, to succeed Mr. Sackett H. Mead, whose term expired.

June 30 marked the highest admission rate in the history of the hospital, exclusive of transfers, 553 patients being received during the fiscal year.

A floor show, with an all-patient cast, was given under the direction of one of the Fairmount patients at the assembly hall on the afternoon of February 20.

The annual joint meeting of the Binghamton Psychiatric, Endicott-Johnson and Broome County Medical Societies and the Binghamton Academy of Medicine was held in the assembly hall on the evening of May 25. Dr. Ormon C. Perkins, professor of neurology of the Long Island College Hospital, spoke on "Common Neurological Diseases Encountered in Private Practice, and Their Treatment." Dr. H. S. Gregory and Dr. Geo. S. Lape presented a case of hemiballismus, with motion pictures.

The elms on the hospital property were attacked with canker worm and elm leaf beetle; we were able to hire a tree surgeon who sprayed the trees twice with a solution of arsenite of lead.

W. P. A. men, who have been working at the hospital on various jobs, such as collecting stone from creek beds for road building, helping clean out woods, cutting timber, and assisting with repairs of all kinds about the hospital property, have finished their activities until new projects are assigned us.

On March 18 heavy rains and melting snow raised the water of the Susquehanna River to an unprecedented height. As the river rose the water poured over the wall at the power house and flowed into the filtering water basins and pump room. It was therefore necessary to bandon filtering and chlorinating our water supply. There was about eight feet of water in the reservoir on the hill and every effort was made to conserve this supply. As the flood mounted, water entered the boiler room and flooded the ash pits;

four inches of water also flowed into the dynamo room and generators were put out of commission. Arrangements were made with the Binghamton Gas and Electric Company to install a line to our panel board so that we were able to have electric current throughout the hospital. The cold storage, ice plant, laundry and use of automatic dish washers were shut down. The flood waters flowed over the farm property and it became necessary to remove the patients from Parkhurst to Hillside cottage; 95 cows were removed from Parkhurst barn to Plymouth Rock. Inasmuch as the east side of the city was cut off from the rest of the city by flood waters, the fire chief of the city of Binghamton was informed that the hospital fire department would render any assistance needed on the east side of the city. Extra men were detailed to the fire department for day and night service and responded to one alarm.

Permission having been received from the State Department of Health, river water was pumped into the mains in order to supply water for flushing toilets and in case of fire. One hundred 48-gallon milk cans were loaned to the hospital by the Crowley Milk Co., of Binghamton and water was secured, for domestic purposes, from Orchard House well.

No great damage was done by the flood; 90 to 100 hens were drowned at Plymouth Rock barn and a number of boilers were put out of commission. During the height of the flood the hospital was completely isolated from the city and in order to reach it, it was necessary to go by a circuitous route via the Colesville road.

CENTRAL ISLIP

On February 26, 1936, Dr. Frank H. Pike, professor of neurophysiology, Columbia University College of Physicians and Surgeons, New York City, gave a lecture in Robbins Hall on "Some Observations on Convulsions" to members of the medical staff, social workers, occupational therapists and members of the nursing staff. This lecture was also attended by members of the Long Island Psychiatric Society.

On April 30, 1936, the regional conference of the New York State Conference on Social Work, was held at this hospital.

On May 26, 1936, the Nurses' Association of the Counties of Long Island, Inc., District No. 14, arrived at the hospital with 170 visiting nurses.

On June 18, the nurses' training school graduation was held. There were 11 graduates. Dr. John C. Thurrott of the bureau of child guidance, department of education, city of New York, addressed the class.

On various occasions the following films were shown to the school of nursing, medical and nursing staffs:

Traumatic Surgery of the Extremities.

The Relation of Absorbable Sutures to Wound Healing.

Surgical Treatment of Peptic Ulcers.

Drinking Health and the Schaeffer Method.

Lantern slides of the History of Nursing, secured from the National League of Nursing Education.

Mr. Stephen C. Wolfe, special attendant, occupational therapy, died on April 15.

Mr. Karl Roche, attendant, died at the hospital, on April 19.

CREEDMOOR

A board of visitors was appointed for Creedmoor, members being:

Mr. David F. SodenTerm expires Dec. 31, 1936

Mrs. Florence C. Whitney . Term expires Dec. 31, 1937

Mr. Henry F. SamstagTerm expires Dec. 31, 1938

Mr. Leonard H. Bernheim .Term expires Dec. 31, 1939

Mr. George H. BrunsTerm expires Dec. 31, 1940

Dr. Thomas J. LongoTerm expires Dec. 31, 1941

Mrs. Edna V. Newbranch ..Term expires Dec. 31, 1942

Their first and organization meeting was held on June 30. Mr. Leonard H. Bernheim was chosen temporary chairman and Mrs. Edna V. Newbranch temporary secretary.

Queens County was tentatively assigned as our district and received our first new patient under this assignment on May 29. We are preparing building O to serve as a reception unit pending appropriation for a reception building.

One employee, a cook, developed cerebrospinal meningitis, was removed to Queensborough Hospital for Contagious Diseases, and died nine days later. No other cases developed.

We received approximately one thousand books and five hundred magazines from the Book Sharing Week Committee.

Our annual field day for patients was held on June 20, and was attended by 2,138 persons.

HARLEM VALLEY

Dr. John R. Ross, superintendent, as a member of the 8-hour day committee, visited five institutions in Illinois in May.

HUDSON RIVER

The annual meeting of the Dutchess County Medical Society was held at this hospital on January 8. An interesting program was presented by two members of the medical staff, Dr. Lloyd E. Watts and Dr. Joseph J. Doltolo.

On January 23, word was received that the nomination of Dr. J. Wilson Poucher for reappointment to the board of visitors of this hospital had been confirmed by the Senate, his term to expire December 31, 1942.

On January 25, Mr. William R. Wright, assistant steward, completed 50 years of service in the hospital. His many friends and fellow workers celebrated this unusual length of service by presenting to him at the assembly hall a suitable present as a memorial of their regard and friendship for his loyal, efficient service for this long period of time.

Similarly on January 31, Miss Kate Riddle, chief supervisor, completed 50 years of service and was in like manner presented with a gift from her fellow employees as a token of their esteem for a truly extraordinarily long period of faithful service to the hospital.

A mental hygiene institute was held at this hospital during January for the teachers of Fairview and Viola Schools of Dutchess County.

On January 22, a moving picture concerning "Modern Methods of Anaesthesia" was shown at the assembly hall, under direction of Dr. Robert W. Andrews, visiting surgeon of the hospital. This was seen by most of the medical staff, graduate nurses and student nurses of the hospital.

The death of Mr. John H. Flinn, steward of this hospital, occurred on February 10, after a brief illness. Mr. Flinn had been steward for the past 10 years and his service was distinguished for unusual efficiency in the business administration of the affairs of the hospital.

On February 11, some of the provisional members of the Poughkeepsie Junior League, visited the hospital and were shown some of its interesting activities.

On March 19, the annual meeting of the Dutchess County Psychiatric Society was held at this hospital. Drs. Charles E. Niles, Arthur J. Leader and Robert A. Savitt of the hospital staff, presented interesting case material. The following officers were elected for the ensuing year: E. S. Steblin, M. D., president; Charles M. Gilmore, M. D., vice president; B. B. Young, M. D., secretary; T. M. Proctor, M. D., treasurer, and J. P. Kelleher, M. D., chairman of the nominating committee.

A number of the members of the medical staff of the hospital attended the fourth series of the William Salmon Memorial Lectures at the Academy of Medicine in New York City on April 10, 17 and 24.

On April 15, Mr. Andrew J. Delaney was transferred from the St. Lawrence State Hospital, to become steward of this hospital.

On April 9 and 10, a number of members of the medical staff of this hospital attended an interhospital conference at the New York State Psychiatric Institute, and papers were read by the following members of the medical staff; Dr. Solon C. Wolff, Dr. Isaac N. Wolfson, and Dr. Frederick J. DeNatale.

On May 31, Dr. Blanche Dennes, senior assistant physician, retired after 24 years of faithful and loyal service to the hospital. Her retirement is a very definite loss to the hospital.

On June 10, an instructive moving picture concerning "The Diagnosis of Urologic Conditions" was given at the assembly hall before the medical staff, nurses and student nurses.

Mary A. Johnson was promoted to assistant social worker, May 16.

KINGS PARK

The following employees retired from the service of the hospital during the past six months period:

Mrs. Emily Cook, night supervisor, February 1, 1936.

Mr. Francis McCormick, special attendant, garage, February 1, 1936.

Miss Mary J. Rowland, R. N., night charge nurse, June 1, 1936.

Mr. James Slavin, R. N., night supervisor, July 1, 1936.

The following employees died:

Mrs. Alice Bailey, laundry employee, died February 10, 1936.

Miss Katherine McGuire, attendant, died April 12, 1936.

Mr. John McCandless, charge attendant, died May 1, 1936.

Dr. William Neuss was reappointed a member of the board of visitors, January 1.

Miss Elvira Serafini was appointed acting dietitian, February 17.

The Long Island Psychiatric Society held the following meetings:

January 21, at Veterans' Administration Facility, Northport, N. Y. Address: "Present Trends in Research in Mental Diseases," by Dr. Nolan D. C. Lewis, Neurological Institute, New York City.

March 17, at Robbins Hall, Central Islip State Hospital, Central Islip, N. Y. Address: "The Rejection of Children," by Dr. Frederick Rosenheim of Central Islip, L. I., and a discussion by Dr. Donald W. Cohen, Child Guidance Psychiatrist, Department of Mental Hygiene, Albany, N. Y.

April 21, at Veterans' Administration Facility, Northport, N. Y. Address: "Encephalography and Brain Tumors," by Dr. Cornelius J. Dyke, assistant medical director, Neurological Institute, New York City.

The Emergency Relief Bureau of Nassau County sent separate groups to the hospital on April 14 and May 15, respectively, to receive lectures and demonstrations on various types of mental disease by members of our medical staff, also a tour of the hospital was made.

On April 25, a group of 60 students of the sociology department of Adelphi College visited the hospital. They were given lectures and demonstrations and also a tour of the hospital occupational therapy shops.

On April 26, a group of about 300 students from the evening and continuation division, adult education project, department of education, New York City, visited the hospital. They were given a lecture and demonstration.

On May 20, an extension course for health officers of the counties of Nassau and Suffolk was held at the hospital, where they received instruction on the various forms of commitment; also lectures and demonstrations of various types of mental diseases.

On May 30, appropriate exercises were held at the hospital in commemoration of the tercentenary of the first settlement of white people on Long Island.

Mr. John F. Glavin, assistant steward, was transferred to the Pilgrim State Hospital, on April 1.

Mr. Frederick T. Lawson was appointed steward, March 1.

Mrs. Dorothy Walker, assistant social worker, resigned, March 15.

Miss Mary E. Graham was appointed assistant social worker, February 1.

Mr. Frank Garritano was appointed assistant steward, April 1.

MANHATTAN

Mr. L. C. Bisselle completed a survey of the hospital on January 17 for the Phillips' Hospital Survey, sponsored by the United Hospital Fund.

A fire of unknown origin was discovered in vacant pavilion R of the old base hospital at 8:30 p. m., February 19. The hospital fire department responded to an alarm with the apparatus. As the fire had gained headway and other base hospital buildings were threatened, the city fire department was notified and sent over three trucks on our ferry boat. The city's fire boat crew saw the fire and rendered assistance by their personnel. Three streams, with our own hose, were played on the fire and these sufficed to extinguish the flames by midnight. The cold and darkness handicapped the firemen, but there were no mishaps and the fire was extinguished by the time the west part of the H-shaped pavilion had been destroyed. This constituted no loss as it was to be razed at the first opportunity.

The Psychiatric Society of the Metropolitan State Hospitals held a meeting at this hospital on Monday evening, February 24, at which the following program was presented:

"The Concept of Mental Deficiency in Theory and Practice," David Wechsler, Ph. D. Discussion, Edward J. Humphreys, M. D.

"Certain Aspects of the Migrainous Episode," Henry Alsopp Riley, M. D. Discussion, Richard M. Brieker, M. D.

A lawn party, given by the Manhattan State Hospital Nurses' Alumnae Association in honor of the graduating class of 1936, was held in the assembly hall on Wednesday evening, June 10. The adjacent lawns were decorated with Japanese lanterns. Many guests of the nurses and students attended.

On June 30, the hospital completed the transfer of 441 men and 383 women to the Pilgrim State Hospital.

Mary O'Sullivan, night charge attendant, died April 25.

Mary C. Nolan, night charge nurse, died April 30.

Mr. John A. Coleman was reappointed a member of the board of visitors.

Miss Frances M. Nicoll, occupational therapist, resigned, May 1.

Miss Inez Wenz, occupational therapist, was transferred to the Psychiatric Institute and Hospital, May 1.

MARCY

On January 11, Mr. James Dacus and Mr. Clarence Luce visited the hospital to discuss the organization of a Federal Credit Union at this hospital. As a result of this meeting a charter was obtained.

On February 6, a meeting of the visiting and consulting staffs, in conjunction with our own staff was held at this hospital. At this meeting we were fortunate in securing as a speaker, Dr. Edward S. Rogers, director of the pneumonia program, State Department of Health. His subject was pneumonia and lantern slides were shown. Dr. George C. Bower, pathologist at this hospital, discussed the matter of bacteriology and typing in pneumonia. Dr. Edward R. Evans of Utica, opened the discussion.

On February 11 and March 16, card parties for the patients were held in the assembly hall. These were under the direction of the occupational therapy department and about 300 patients attended.

On May 29, Mrs. Sara Caraher, seamstress, retired.

On May 4, Miss Josephine Valentine, inspector of school of nursing, State Education Department, visited the hospital to survey the clinical and teaching facilities of the hospital and to determine whether approval of an affiliate course in psychiatric nursing might be granted by the Department of

Education. Tentative approval for an affiliated school of nursing has now been obtained and several general hospitals have sent their representatives to discuss the sending of affiliates to this hospital.

On May 7, Dr. Edward F. Roberts visited the hospital and showed the moving picture, "Diagnosis and Treatment of Pneumonia," to the staff of this hospital.

The seventh annual field day of this hospital was held on June 4 and was attended by 1,141 patients.

On April 3, Drs. H. H. Dodds and Anna Gronlund, senior assistant physicians; Miss Lena Plante, chief social worker; Miss Pearl Ruby and Miss Vera Smith, social workers, attended the State Regional Conference on social work at Herkimer, N. Y.

On April 18, Lucy M. Cobb, medical interne, was married to Mr. John Ross, a business man of Utica. She resigned on April 30. A tea was given in her honor and she was presented with a silver punch set.

On January 23, Miss Frances Griffith, chief occupational therapist, was married to Mr. Thayer Burgess, an attorney of Utica.

Mrs. Mabel Lago, charge attendant, was killed in an automobile accident, on January 1.

Mrs. Frances Griffith Burgess, chief occupational therapist, resigned, on June 30.

MIDDLETOWN

On the evening of April 18 the Orange County Medical Society met at the hospital and a program consisting of a symposium on nephritis was given. The speakers were Dr. Paul Klemperer, pathologist at Mt. Sinai Hospital, and Dr. Herman O. Mosenthal of the Post Graduate Hospital, New York City.

The Homeopathic Medical Society of the State of New York held its annual meeting at the hospital on April 24 and 25. Business sessions were held at the Mitchell Inn, Middletown, followed by the scientific program at the hospital. The banquet was held on the evening of April 25, the main address being by the Hon. Henry Hirschberg, district attorney of Orange County, who spoke on the relationships of the legal and medical professions.

The Orange County grand jury visited the hospital on April 29 for their annual tour of inspection.

The senior class of the New York Homeopathic Medical College came to the hospital on May 15 and 16. Tours of inspection of the hospital and clinics and demonstrations of the various types of mental disease were given by members of the staff.

On Wednesday, May 27, Dr. Frank W. Laidlaw, district supervising health officer, visited the hospital with 10 local health officers who are taking a special course in preparation for their duties. They were given lectures by members of the staff and made an inspection of the wards of the hospital.

PILGRIM

Stephen D. Whitaker was appointed occupational therapist on February 11.

The first parole clinic of the hospital was held at the Psychiatric Institute, March 25. Dr. H. B. Lang, clinical director, was in charge of the clinic.

John J. Glavin, assistant steward at Kings Park State Hospital, was transferred to a similar position at Pilgrim State Hospital, April 1.

Francis Spencer, attendant detailed to farm and garden, died May 24, after a prolonged illness.

Miss Josephine Valentine of the State Board of Nurse Examiners visited the hospital May 25, to survey facilities and plans for a nurses' training school.

Dr. W. Maddren Dawson, assistant physician, and his mother-in-law, Mrs. Carville D. Benson, were killed June 12, 1936, when their automobile was struck by a train at Brentwood, L. I.

Dr. Wilbur H. Gerow was appointed dental interne, February 10.

Dr. William H. Hoffman was appointed dental interne, February 1.

Dr. Morris A. Lazarus, dental interne, resigned, January 15.

ROCHESTER

Shortly after the assembly hall was put into operation, a member of the board of visitors, Mr. B. E. Finucane, presented the hospital with a Steinway piano for its use. We are very proud of this piano and indeed grateful to the donor. There can be no doubt that everyone attending functions in this auditorium will enjoy the thoughtful contribution to our patients' welfare.

In February the hospital acted as host to the Western New York Occupational Therapy Association. In spite of the weather there were over 100 persons in attendance. The meeting was addressed by members of the staff and others who were more or less directly in contact with occupational therapy activities.

In April four members of the staff, Drs. Streeter, Smith, Hunt and Ziegler, attended the interhospital conference at the Utica State Hospital. A paper was presented at this conference by Dr. Streeter, director of clinical psychiatry.

In May the Genesee Valley League of Nursing Education held a meeting at the hospital and about 50 were in attendance.

On May 22, at the request of the local health bureau, a special clinic on neurosyphilis and its treatment was given at the hospital. This was a part of a three-day program provided by the Rochester health bureau for health officers, clinical directors and others who have to do with social disease in the western part of New York State. There were 28 physicians in attendance. In addition to demonstrations, papers were given by Drs. Veeder, Streeter and Smith. Other parts of the program were conducted by other members of the staff.

On June 17, the annual field day was held at the hospital. In accordance with custom the usual activities and stunts were provided through the occupational therapy department. The music for this event was furnished by a band of 60 pieces provided by the W. P. A. music organization.

ROCKLAND

Mr. Leo J. Greenier was appointed steward, January 1.

Mrs. Louise L. Weiner was appointed special attendant teacher, January 1.

Mr. Charles McBreen, chief engineer, attended the annual meeting of the New York State Sewage Works Association held in New York City, January 14-17.

Miss Janet B. Tiffany was appointed special attendant teacher, January 20.

An epidemic of scarlet fever started in this hospital in January and continued through February and the early part of March. In all there were 180 cases. Most of these cases were extremely mild in character and were largely confined to the male side of the institution.

On April 10, Dr. William S. Bainbridge of New York City, addressed the student nurses on the subject, "Legal Responsibilities of Nurses."

On April 14, capping exercises for the class of 1939 were held in the assembly hall.

On April 27, the regular meeting of the Psychiatric Society of the Metropolitan State Hospitals was held in the assembly hall of this hospital.

On April 22, the Rockland County Medical Society held their meeting at this institution.

During the spring 250 male and 50 female patients were transferred to the Middletown State Homeopathic Hospital to relieve the overcrowding here.

Dr. Frank F. Tallman attended the annual meeting of the American Psychiatric Association held in St. Louis, Mo., from May 4-9.

During the past six months the following deaths among employees occurred:

Everett Hale, attendant, January 10.

John Quinn, storekeeper, January 18.

Thomas Gilmore, attendant, March 11.

Albert Simpson, charge nurse, March 27.

ST. LAWRENCE

Dr. Harry Mintzer, dental interne, was appointed dentist, March 1.

James A. Sandburg was appointed steward from a civil service eligible list, on April 16.

UTICA

On January 13, 1936, Mr. James A. Dacus of the Credit Union Section of the Farm Credit Administration, met a representative group of employees and explained the objects and operations of the credit union. After discussion of this subject, it was determined by the employees present to organize a credit union at this hospital, and the selection of directors and election of officers followed.

An amateur show was held on the evening of February 3. Auditions held previously disclosed a variety of talent among both patients and employees. Prizes were awarded, the winners being judged by the amount of applause received.

The annual party for the officers and employees of the hospital, in the form of a masquerade dance, was held on the evening of February 19. About 250 were present.

On February 29, the capping exercises were held in the Faxton Nurses' Home auditorium. Nine students of the Utica State Hospital School of Nursing received their caps and capes.

Twenty affiliating student nurses, representing the Faxton and Memorial hospitals in Utica, and the Memorial and University hospitals in Syracuse completed their three months course in psychiatric nursing on March 8. On the same date a similar group, 19 in number, reported for duty and completed the course on June 8.

Miss Emily Harris, supervisor of the women's department in the main building for several years, retired on March 31, having completed 25 years of service.

The volleyball league games with Marey ended on April 3, with the Utica patients winning the trophy for 1936.

All members of the social service department attended the regional conference of the State Conference of Social Work held at Herkimer, N. Y., on April 3.

Professor Roy W. Foley of Colgate University, Hamilton, N. Y., and 80 students visited the hospital on April 10. Following a visit to the various departments, they were addressed by Dr. N. J. T. Bigelow, acting director of clinical psychiatry, on hospital administration and care of mental patients.

The up-State interhospital conference was held at this institution on April 17 and 18. Dr. Clarence O. Cheney, director of the Psychiatric Institute and Hospital, New York City, presided and the meeting was attended by 60 physicians and social workers, representing the up-State district.

Professor Ernest M. Ligon of Union College, Schenectady, and 75 students visited the hospital on May 6; on May 9, Prof. Carl Smith of Skidmore College, Saratoga Springs, came with 22 students; on May 12, Professor Roland McKee of Syracuse University, Syracuse, came with 92 students, and on May 15, Professor C. E. Meyer of the Syracuse North High School, came with 70 students. Each of these groups visited the various departments of the hospital and were given talks on mental diseases by various members of the hospital staff.

On May 14, 14 workers in the welfare department of the General Electric Company at Schenectady spent the day at the hospital to become familiar with its operation and to learn something about the conditions which make it advisable or necessary for persons to be committed here. This group was instructed by Dr. N. J. T. Bigelow, acting director of clinical psychiatry, and Miss Eva M. Schied, head social worker.

Miss Eva M. Schied, head social worker, Mrs. Mary E. Fuller, social worker, and Miss Catherine Charles, assistant social worker, attended the National Conference of Social Work at Atlantic City, N. J., May 24 to 29.

A successful field day was conducted on June 2 under the auspices of the occupational therapy department. The usual contests and exhibition drills were held and the winners all received prizes.

On June 18, a group of 19 social workers of Herkimer County spent the day at the hospital where they attended a staff meeting and a lecture preceding it, explaining the work of the institution and how patients are cared for. In the afternoon a round table conference was conducted at which the clinical director presided. "The Cooperation of Agencies in the Community" was the topic.

On June 26, Miss Mary Evans and Miss Ella Gage, official visitors of the State Charities Aid Association, made a general inspection of the hospital

and afterwards had a conference with the superintendent in reference to the present condition and future needs of the institution.

Mrs. Ruth B. Nelson, who has been chief occupational therapist here for the past 10 years, terminated her services at this hospital on June 30 pending her transfer to the Marcy State Hospital.

Mrs. Ada M. Plaisted, occupational therapist, having about 14 years of service to her credit, retired on June 30.

WILLARD

Miss Cornelia G. Smith was appointed to the position of special attendant, occupational therapist, on January 6. She is a graduate of the Philadelphia School of Occupational Therapy.

Messrs. Alfred McMurdie, assistant heating and ventilating engineer, G. A. Thornton, associate mechanical construction engineer, L. V. Herron, associate mechanical inspector of the Department of Public Works, and Harry Buchert of the Drake Block Company, New York City, inspected the boilers at the power house, February 19-21.

Monday night, February 24, a fire occurred which destroyed the cab of the locomotive. The locomotive was taken to the engine house at about 6 o'clock for the night. Investigation shows that the fireman stayed for about three-quarters of an hour cleaning out the grates, removing ashes and clinkers and putting on coal. After he had completed this work he left the fire door open and went off duty at about a quarter to seven. The night watchman made his first visit to the locomotive at about 10 minutes past 7. He looked the engine over, closed the fire door and everything seemed to be in proper condition. Shortly before 8 o'clock a fire was observed in the engine house and when this was investigated the cab was found to be on fire. An alarm was sounded and the fire was extinguished.

On the night of March 17 an extremely severe ice storm caused much destruction in this section. Many old and beautiful trees were greatly damaged when their branches became so heavily coated with ice that they fell. Many trees in the orchards were injured, and it is estimated the grape crop will be less than 50 per cent of normal. For a week the hospital was without telephone or telegraph communication.

During the week of March 23 flood conditions again caused some damage to the hospital grounds. However, after the experience of last July and in anticipation of these floods, temporary ditches, dikes and dams were constructed where it was thought the water would do the most damage. In this way the buildings were all protected, and practically no damage other

than water in basements was experienced. The heavy rains and water, however, did considerable damage to the roads of the hospital. Seneca Lake rose to a level as high as during the floods of last summer. The high water was accompanied by extremely strong winds, at times reaching gale proportions. The waves on the lake were high and beat continuously for several days against the sea wall on the west edge of the grounds. The waves dashing over the sea wall washed the dirt from behind the stones and a large proportion of the wall has, consequently, been ruined and will require extensive repairs.

Word has been received from the Department of Agriculture and Markets that the tuberculin test conducted recently on the herd of this hospital shows that the cows are free from tuberculosis and continue to be an accredited tuberculosis-free herd.

During the month of May the new spur track to the power house was completed. The work of installing this track was done partly by hospital labor and partly by the Lehigh Valley Railroad. Because heavier engines will be used when our present railroad is abandoned, it is necessary that a new track with less curves and grade be extended to the boiler house for the delivery of coal. The track runs directly over the coal hopper and a carload at a time may be placed in such a position that it will reduce considerably the handling of coal. This new track extends to the west beyond the power house, providing space for five cars. It is intended that the space on either side of the track will be used for coal storage. The hospital forces cleared the site. This consisted of cutting down and removing trees and brush, moving two summer houses, which were in line of the new track, laying the ties in position and placing the rails in an accessible spot. Practically all the ties, rails, switches, rail-plates, etc., were salvaged from the old track, which is being removed as rapidly as possible.

Mr. Charles J. McEniry of the Department of Purchase was at the hospital March 6, relative to bent wood chairs.

Mr. Charles B. Dix, supervising power plant engineer, visited the hospital, April 16 and June 11 to inspect the boilers at the power house.

Hon. Allen Newell, member of the Assembly, was at the hospital, May 1.

Mrs. Glenna B. Henry was appointed special attendant, physical training, June 22. She is a graduate of Boston University and has had a wide experience in this type of work.

Stephen M. Guinan, charge nurse, died June 26.

Mr. Samuel H. Peltz was appointed steward, January 16.

PSYCHIATRIC INSTITUTE AND HOSPITAL

Dr. Clarence O. Cheney, director of the New York State Psychiatric Institute and Hospital, retired from State service on July 1, 1936, to accept the office of medical director of the New York Hospital at White Plains.

A down-State interhospital conference was held on April 9 and 10. The attendance was large. The members of the different down-State hospitals were active in the presentation of papers and in the discussion of them. It was felt that the symposium which had to do with the clinic activities in which the State hospitals are engaged served as an excellent medium through which to exchange experiences. Many of the problems relating to the clinic for adults and for children were discussed at much length.

Arlene Carter, assistant occupational therapist, resigned on January 1.

Inez Wenz, assistant occupational therapist at the Manhattan State Hospital, was transferred to a similar position at the institute on March 1.

James Stout, a laborer at this institution, died on May 19.

SYRACUSE PSYCHOPATHIC

On February 13, 1936, Drs. Wykoff and Cotter visited the hospital in the interests of the survey of medical schools being conducted by the American Medical Association.

On April 8 and 9, 1936, Dr. Steckel attended the conference for professors of psychiatry, held under the auspices of the National Committee for Mental Hygiene at Phipp's Institute, Baltimore, Md.

Miss Frances M. Nicoll was appointed occupational therapist, May 1.

Miss Winifred Shaffer (Mrs. Charles Gallinger) resigned from the position of chief occupational therapist, June 30.

STATE INSTITUTIONS

CRAIG COLONY

On February 19, the annual Washington-Lincoln smoker of the Colonists' Club was held in the House of Elders. Several hundred male patients were in attendance.

On May 14, the women's chorus of the Rochester Gas and Electric Corporation presented a concert at the colony.

On May 22 to 24, a Boy Scout camporee was held on the colony premises. Among 264 scouts present, were 48 members of the colony troop. There were also 40 scout leaders in attendance.

On June 10, the Medical Society of the County of Livingston held a meeting at the colony.

On June 15, Charles Bills, a voluntary patient, stole an automobile belonging to a colony employee, and after driving through various State highways in the county, finally was arrested by State troopers and held for the next grand jury.

Frederick W. Hitchcock was appointed steward on January 15.

Dr. Stanley R. Hare, consulting surgeon, died March 26.

The following deaths among employees occurred during the six-month period just ended:

Mrs. Ruth Hughner, attendant, February 22.

Miss Catherine Hurley, attendant, March 24.

Miss Mary E. Winship, occupational therapist, April 16.

Malcolm McIntyre, brickmaker, June 1.

LETCHWORTH VILLAGE

Governor Herbert H. Lehman appointed Samuel Osgood Miller of West Nyack, N. Y., a member of our board of visitors to fill the vacancy occasioned by the resignation of Justice Mortimer B. Patterson, whose election to the Supreme Court last fall necessitated his retirement from the board.

Dr. Edward J. Humphreys, director of research, represented Letchworth Village at the May meeting of the American Association on Mental Deficiency in St. Louis, Mo., and presented four papers by members of the staff of Letchworth Village who were unable to attend the meeting. He also discussed a paper, "Conduct Disorders of Intellectually Subnormal Children," by Dr. Lurie of Cincinnati, which was given on the program of the newly-formed section on Mental Deficiency of the American Psychiatric Association.

Four of our social workers attended in May the National Conference on Social Work at Atlantic City, N. J.

During the month of May, Letchworth Village began the use of boarding homes for some of her children. To date only four boys have been chosen. These children were selected on the grounds of good behavior, quality of work, pleasing personalities, and the ability to benefit from normal home life.

On Memorial Day, all the relatives and friends of the children were invited to come to the institution and go anywhere they wished. The entire day was given up to the visitors. Memorial day exercises were held in the morning at Kirkbride Hall. At noon there was a picnic lunch outdoors for all the children, and in the afternoon exercises were put on at both schools to show some of the things that the school children do. As far as one could judge, there were probably five or six hundred visitors here on that day.

It is with great sorrow and regret that Letchworth Village has to report in this issue the death of its good superintendent, Dr. Charles Sherman Little; one of the members of its board of visitors, Mr. James H. Morrissey of Haverstraw, N. Y.; and one of the members of its advisory board, Dr. H. H. Tyson, ophthalmologist, of New York City.

The sudden passing away of Dr. Little early in the morning of June 6, 1936, was, indeed, a shock to the entire institution, and we still cannot get accustomed to his not being with us. It seems as though the heart of the institution is gone. He was a good friend to everyone, both patients and employees.

Letchworth Village was Dr. Little's life work. He came here on July 1, 1910, when Letchworth was nothing but a dream and a large tract of land. During the intervening 26 years, he created, through his undying interest in everything concerning the institution, his untiring efforts, his thoughtfulness, his rugged honesty, and his farsightedness, Letchworth Village as it is today, the model institution of the State. As Dr. Charles Davenport of eugenics record office, Cold Spring Harbor, L. I., said, "He built the greatest institution for mental defectives in the world. It will be his lasting monument."

Dr. Little was laid to rest at 11:30 a. m., June 8, 1936, in the Congregational Church Cemetery at Webster, N. H., the town in which he was born and which he loved all his life.

Mr. Morrissey's death was also very sudden. He passed away in his sleep on June 11, 1936. The day before, he attended a board of visitors' meeting here at the institution and seemed in good spirits. From the time of Mr. Morrissey's appointment on the board in 1920 until the time of his death, he was very much interested in the institution, seldom missing a board meeting and coming up at various times during the year to visit the institution and the children. The State and county, as well as Letchworth Village, have lost a fine and useful citizen.

Letchworth Village has led all institutions in the production of milk for the year with the exception of the month of February when it was second in line.

On June 25 about 30 Rockland County dairy farmers held a meeting here. They visited the farm and dairy and were served with luncheon at Franklin. Professor Brownell of Cornell University, spoke on live stock and breeding.

Dr. H. H. Tyson, on the Letchworth Village advisory staff for several years, died in April. To date, no one has been appointed in his place.

NEWARK

The tuberculosis survey of the entire population, both patients and employees, which was conducted at this school by Dr. William Siegal and Dr. Frederick Beek, and two X-ray technicians of the State Department of Health, Albany, was completed on February 25. A total of 1,175 pictures were taken. The X-rays were taken following the inoculation of a new skin test described as a "precipitate protein derivative." This new skin test is the result of years of research under direction of the National Tuberculosis Association and offers many advantages over those formerly used.

In connection with this survey, Dr. Esmond R. Long, director of Henry Phipps Institute, University of Pennsylvania, Philadelphia, visited the school on January 25.

Dr. Florence Seibert, assistant professor of biochemistry at the Henry Phipps Institute, University of Pennsylvania, Philadelphia, visited the school on January 29.

Dr. R. E. Plunkett, general superintendent of tuberculosis hospitals in New York State, visited the school on January 29.

A dental clinic was held at the school on February 11. Several different methods for using novocaine and how it could be used to best advantage were demonstrated.

Dr. E. A. Baumgartner, pathologist, and Dr. Jacob Sirkin, medical interne, reported on a case of "Tuberculous Clavicle," which is very rare, only 30 cases having been known in medical history.

On February 9, the colony house at Lyons was ignited from a fire which destroyed the Presbyterian church next door. Slight damage was done to institution property.

On February 11, we were notified of the reappointment of Mrs. Mary D. Kane as a member of the board of visitors.

Fourteen registered nurses of this school attended a two-day session of the institute sponsored by the Genesee Valley Nurses' Association and Genesee Valley League of Nursing Education, held in Rochester.

On April 14, the Wayne County Medical Society held its monthly meeting at this school. Dinner was served at 6 p. m., followed by the regular business meeting. Dr. William Siegal, director of the tuberculosis division of the State Department of Health, was the featured speaker, addressing the meeting on "Tuberculosis Survey at the Newark State School." Dr. E. A. Baumgartner, pathologist, and Dr. Jacob Sirkin, medical interne, presented a joint discussion of "Tuberculous Clavicle." Dr. H. G. Hubbell, clinical director, showed a full length movie entitled "Family Care." Louis A. Whitfield, chief physical therapist, showed movies on "Spastic Paralysis."

This school was notified of the death of Dr. N. L. McDonald on April 24, in Rochester. Dr. McDonald had been a member of the board of visitors for 27 years.

Ida M. Aplin, domestic teacher, and Lois A. Whitfield, chief physical therapist, spent the week of May 1 in St. Louis, where they attended the annual conventions of the American Association on Mental Deficiency and the American Psychiatric Association. Miss Aplin read the paper prepared by Ruth E. Stuerwald, head teacher, on "Imagination, the Power of Progress." Mrs. Whitfield spoke on "Segregation in the Treatment of Spastic Patients," which included colored motion pictures of the daily activities of spastic patients receiving treatment at the school.

Dr. Rose R. Donk, medical interne, spent the week of May 18 at the Henry Phipps Institute, University of Pennsylvania.

Mary Castle, the first patient to obtain employment as operator in a beauty parlor, was graduated from a class in beauty culture on April 7, at which time she received her registered certificate.

Mr. Peter Van Koeveringen, who had worked as laborer at this school for the past 12 years, died on January 25, 1936.

ROME

Summer school is again open at Rome, with 70 students enrolled and with representatives from 11 states—New York, New Jersey, Pennsylvania, Maryland, Massachusetts, Ohio, Michigan, Indiana, Illinois, Virginia, South Carolina. In addition to the regular courses carried on in previous years, that is, special class work for retarded children, social case work, mental measurements, abnormal psychology, we have added this year a course in musical adaptation and social adjustment, and a course in esthetic, interpretative and folk dancing, and also a course in juvenile delinquency.

We have established special school colonies at our eight major colonies, taking a barn and converting it into a schoolhouse where the teacher may conduct more formal school work than could be done formerly in the colony house, and where in some instances, boys and girls between 8 and 12 years of age, may attend school together.

In addition to the regular teacher's work, special instructors in domestic arts, scout work, dressmaking, music and physical education, visit the various colonies at least one-half day each week and instruct the children in their special lines.

A piano, phonograph and radio are provided at each schoolhouse and opportunity is given the children for training in musical appreciation and a liking for standard music.

The new hospital for 160 beds for children under six years of age for special study, care and treatment is well under way. Foundation is completed and a part of the superstructure is installed.

This summer we have inaugurated bi-monthly entertainments on the athletic field, to which not only patients and employees of the institution but also the outside public, are invited. The entertainment is held in the early evening and consists of choral singing, folk dancing, one-act plays or operettas, special music on the part of the institution band and orchestra, scout's band, scout drilling and demonstrations of first aid on the part of scouts.

A large house in Rome has been made available as a social and music center for the girls from the colonies about Rome and the girls in training at the institution where they may go for little birthday parties, afternoon receptions and tea and have special musical training, both vocal and instrumental. The object of this center is to train girls during their school period in social customs and graces in order to render them more adaptable when later they are allowed to leave the institution to go home or on parole or to live elsewhere.

There were no changes in the staff.

Mr. John Ricci, laborer, died April 1, 1936.

Mr. James DeLaney, cook, died May 18, 1936.

SYRACUSE

In February, through the kindness of the local W. P. A., a scoutmaster was assigned to the school in order to develop a troop of Boy Scouts. A troop of 22 members was formed, which has been accepted by the Council of the Boy Scouts of America.

On June 14, the camp for colony and parole girls was opened under the direction of Miss Dorothy J. Dawley, a graduate of Syracuse University.

On June 22, the boys' camp of the school was opened with 40 boys and an attendant. This camp is under the direction of Mr. Jean S. Long, physical instructor of the school.

WASSAIC

On May 27, the Right Rev. Bishop Donahue of New York City confirmed a class of 60 children in the school building.

Dr. Charles F. McDonald, dental interne, was promoted to the position of dentist, April 1.

On the evening of May 21, the institution entertained the Dutchess County Psychiatric Society. Dr. Rudolph J. Depner presented a paper

on "Elephantiasis," and Dr. Omar W. Gilmour a paper on "Tuberous Sclerosis." Between the presentations of these papers the boys' and girls' choruses sang several selections.

CHANGES IN PERSONNEL IN THE MEDICAL SERVICE

Abbate, Dr. Stephen H., senior assistant physician at the Middletown State Homeopathic Hospital, was granted an extended leave of absence because of illness.

Adams, Dr. Leslie P., medical interne at the Brooklyn State Hospital, was promoted to assistant physician, January 9.

Alderman, Dr. Jerome, psychiatric interne at the Psychiatric Institute and Hospital, resigned June 30.

Anderson, Dr. Forrest K., assistant physician at Craig Colony, resigned on April 1.

Bleicher, Dr. O. H., was appointed medical interne at the Harlem Valley State Hospital, February 1.

Brown, Dr. DeWitt Clinton, medical interne at the Central Islip State Hospital, was promoted to assistant physician, February 4.

Byrne, Dr. John B., was appointed medical interne at the Rockland State Hospital, January 1.

Cheney, Dr. Clarence O., director of the Psychiatric Institute and Hospital, retired from State service as of June 30; on June 15 he was inducted as medical director of the New York Hospital—Westchester Division (formerly Bloomingdale Hospital).

Chiarello, Dr. Carmelo J., medical interne at the Brooklyn State Hospital, was promoted to assistant physician, May 1.

Clardy, Dr. Ed Rucker, medical interne at the Rockland State Hospital, was promoted to assistant physician, January 15.

Cline, Dr. William B., Jr., was appointed assistant physician at the Harlem Valley State Hospital, May 20.

Cobb, Dr. Lucy M., medical interne at the Marcy State Hospital, resigned April 30.

Daniel, Dr. Bruno, was appointed medical interne at the Manhattan State Hospital, June 1.

Dawson, Dr. William Maddren, assistant physician at the Pilgrim State Hospital, died June 12.

- Dennes, Dr. Blanche, senior assistant physician at the Hudson River State Hospital, retired May 31.
- Di Giovanna, Dr. Mario A., medical interne at the Rockland State Hospital, was promoted to assistant physician, January 17.
- Doltolo, Dr. Joseph J., medical interne at the Hudson River State Hospital, was promoted to assistant physician, February 1.
- Franklin, Dr. Robert B. C., was reappointed medical interne at the Wassaic State School, February 8.
- Gray, Dr. Nelson M., was appointed psychiatric interne at the Psychiatric Institute and Hospital, February 1.
- Haight, Dr. Julius Rothery, was appointed medical interne at the Harlem Valley State Hospital, January 1.
- Hale, Dr. Frank A., was appointed psychiatric interne at the Psychiatric Institute and Hospital, March 15.
- Haynes, Dr. Elmer, medical interne at the Central Islip State Hospital, resigned May 12.
- Hennessy, Dr. Frances M., was appointed medical interne at the Rockland State Hospital, February 1.
- Hogan, Dr. John J., resident physician at the Syracuse Psychopathic Hospital, resigned June 30.
- Hogeboom, Dr. Willard L., was appointed medical interne at Letehworth Village, April 1, and is in charge of the hospital at that institution.
- Holmes, Dr. Merton, was reappointed medical interne at Rockland State Hospital, February 21.
- Horn, Dr. Leonard, assistant physician at the Rochester State Hospital, resigned June 16.
- Horwitz, Dr. William A., junior physician (psychiatrist) at the Psychiatric Institute and Hospital, was promoted to senior physician (psychiatrist), March 15.
- Hughes, Dr. Henry W., was appointed medical interne at the Central Islip State Hospital, January 3.
- Johnston, Dr. Thomas A., was appointed medical interne at the Kings Park State Hospital, February 1.
- Kettle, Dr. Ronald H., was appointed medical interne at the Buffalo State Hospital, February 1.
- Lander, Dr. Joseph, assistant physician at the Rockland State Hospital, resigned June 30.
- Lavin, Dr. Frank, assistant physician at the Harlem Valley State Hospital, resigned June 30.

- Lemmler, Dr. Malwina T., medical interne at the Binghamton State Hospital, was promoted to assistant physician, January 10.
- March, Dr. Thomas A., medical interne at the Buffalo State Hospital, resigned on January 25, to be appointed on the same day medical interne at the Harlem Valley State Hospital.
- Metcalfe, Dr. Grant E., was appointed medical interne at the Gowanda State Homeopathic Hospital, January 1.
- McCarthy, Dr. Joseph J., was reappointed medical interne at the Wassaie State School, June 11.
- McLean, Dr. Grace E., assistant physician at the Middletown State Homeopathic Hospital, was transferred to the same position at the Pilgrim State Hospital, May 8.
- Moore, Dr. Aaron, medical interne at the Central Islip State Hospital, was promoted to assistant physician, January 1.
- O'Neill, Dr. Francis J., was reappointed assistant physician at the Central Islip State Hospital, March 1.
- Perry, Dr. Madelin, was appointed assistant physician at Craig Colony, April 15.
- Pike, Dr. William C., assistant physician at the Rockland State Hospital, resigned January 1.
- Poliak, Dr. Percy P., was appointed psychiatric interne at the Psychiatric Institute and Hospital, May 1.
- Pollack, Dr. Benjamin, senior assistant physician at the Willard State Hospital, resigned June 30.
- Potter, Dr. Howard W., research associate in psychiatry at the Psychiatric Institute and Hospital, resigned March 21.
- Potts, Dr. William L., was appointed medical interne at the Rockland State Hospital, April 1, and resigned due to ill health, June 15.
- Rachlin, Dr. Hyman L., senior assistant physician at the Manhattan State Hospital, resigned May 15.
- Ranger, Dr. C. O., medical interne at the Harlem Valley State Hospital, resigned January 23, to enter the staff of Hartford Retreat, Connecticut.
- Rappa, Dr. James E., medical interne at the Brooklyn State Hospital, was promoted to assistant physician, May 1.
- Reid, Dr. Roger, medical interne, and physician in charge of the hospital at Letchworth Village, resigned April 30.
- Ries, Dr. William H., was appointed medical interne at the Willard State Hospital, March 2.

- Rossmann, Dr. I. Murray, assistant physician at the Buffalo State Hospital, was transferred to the Harlem Valley State Hospital and promoted to the position of senior assistant physician, January 1.
- Runsdorf, Dr. H. Norman, was appointed medical interne at the Brooklyn State Hospital, January 1, and resigned June 30.
- Savitt, Dr. Robert A., was appointed medical interne at the Hudson River State Hospital, January 2, and was promoted to assistant physician, February 1.
- Setnor, Dr. Jules R., medical interne at the Utica State Hospital, resigned on January 7.
- Sisserson, Dr. Barney, formerly with the New York State Training School for Boys at Warwick, was appointed medical interne at the Wassaie State School, January 15.
- Smolev, Dr. Heyman, assistant physician at the St. Lawrence State Hospital, resigned January 6.
- Snow, Dr. Herman B., medical interne at the Binghamton State Hospital, was promoted to assistant physician, January 20.
- Taylor, Dr. Charles W., was appointed medical interne at the Kings Park State Hospital, January 2.
- Taylor, Dr. James A., medical interne at the Kings Park State Hospital, was promoted to assistant physician, January 16.
- Thiele, Dr. Walter H., was appointed assistant physician at the St. Lawrence State Hospital, February 1, and resigned March 16.
- Train, Dr. George J., was appointed medical interne at the Brooklyn State Hospital, January 5.
- Viviano, Dr. Michael, was appointed medical interne at the Willard State Hospital, January 3.
- Von Salzen, Dr. Charles F., was appointed medical interne at the Kings Park State Hospital, June 1.
- Ward, Dr. Gladys M., was appointed medical interne at the Hudson River State Hospital, January 14.
- Wiley, Dr. Walter R., assistant physician at the Wassaie State School, resigned February 15.
- Wittman, Dr. Gizella, was appointed medical interne at the Hudson River State Hospital, June 15.
- Zeifert, Dr. Mark, medical interne at the Brooklyn State Hospital, was promoted to assistant physician, February 8.

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"Family Care." Published in Report of Proceedings and Addresses of the Sixtieth Annual Session of the American Association on Mental Deficiency.

E. A. Baumgartner, M. D., pathologist.

"Encephalitis Following German Measles." New York State Journal of Medicine, June 15, 1936.

E. A. Baumgartner, M. D., pathologist, and
Jacob Sirkin, M. D., medical interne.

"Tuberculosis of the Clavicle." Journal of the Amer. Med. Assoc., July 11, 1936.

Ruth E. Stuerwald, head teacher.

"Imagination, the Power of Progress." Published in Report of Proceedings and Addresses of the Sixtieth Annual Session of the American Association on Mental Deficiency.

Lois A. Whitfield, chief physical therapist.

"Segregation in the Treatment of Spastic Patients." Published in Report of Proceedings and Addresses of the Sixtieth Annual Session of the American Association on Mental Deficiency.

ADDRESSES, LECTURES, SPECIAL EDUCATIONAL ACTIVITIES OF THE STAFF

BROOKLYN

F. Ross Haviland, M. D., first assistant physician.

Lectures and clinics to the senior class of the Long Island College of Medicine from January to April.

August E. Witzel, M. D., director of clinical psychiatry.

Talk, "Schizophrenia and Mental Deficiency," to class in psychology from St. John's College, Brooklyn, January 14; paper, "Clinics, Past, Present and Future," read at Interhospital Conference, Psychiatric Institute, April 9; talk, "Misconception of Mental Disease," to Visiting Nurse Association of Brooklyn, April 24; talk, "Mental Hygiene and the Teacher," to group of teachers from Brooklyn Teachers' Association, May 16; talk "Facts and Fancies of Mental Disease," to class in abnormal psychology from Brooklyn College, June 1.

Irving M. Derby, M. D., pathologist.

Address, "Medical and Surgical Treatment in a State Hospital," to St. Marks M. E. Church Forum, Brooklyn, February 2; paper, "Kline Test for Syphilis," read at meeting of New York Society for Clinical Psychiatry, Brooklyn, March 12.

Nathan Beckenstein, M. D., senior assistant physician.

Lecture and demonstration of mental conditions to nurses and instructors from Long Island College Hospital, March 26.

Morris D. Riemer, M. D., senior assistant physician.

Paper, "Phantasies Associated with Persistent Scratching, Biting and Spitting in an Adolescent," read before the Brooklyn Neurological Society, January 15; paper, "Psychic Changes in a Case of Depersonalization," read at the meeting of the New York Society for Clinical Psychiatry, held at the hospital on March 12; presentation of cases of the major psychoses to class in psychology from Yeshiva College, May 22.

Henry S. Millett, M. D., assistant physician.

Paper, "Why Patients Are Returned from Parole," read at Interhospital Conference, Psychiatric Institute, April 9; course of lectures in neurology to the junior class of New York University, given at Bellevue Hospital.

Mark Zeifert, M. D., assistant physician.

Twice weekly, clinical demonstrations of organic psychoses to student nurses from general hospitals in Brooklyn, during the month of January; two clinical demonstrations per week of functional psychoses to student nurses from general hospitals in Brooklyn, during February; clinical demonstrations of cases of organic and functional psychosis to a group of nurses from Brooklyn Visiting Nurse Association on April 24; clinical demonstration of cases of organic and functional psychosis to class in abnormal psychology from Brooklyn Teachers' Association on May 16; clinical demonstration of cases of organic and functional psychosis to a class in abnormal psychology from Brooklyn College on June 1.

BUFFALO

C. Fletcher, M. D., first assistant physician.

"The New York State Department of Mental Hygiene." District No. 1, New York State Nurses' Association, February 4.

"Responsibility of Health Officers Under the Mental Hygiene Law." District State Health Officers' Conference, February 25.

H. L. Levin, M. D., clinical director.

"Psychiatry and Crime." Criminology classes, University of Buffalo, January 3.

"Mental Mechanisms of a Sound Personality." Temple Beth Zion high school department, January 5.

Clinical demonstration of the psychogenic psychoses. Psychology classes of University of Buffalo and State Teachers' College, January 18.

"Mental Hygiene and the Nursing Profession." District No. 1, New York State Nurses' Association, February 4.

"The Psychiatric Approach to Human Problems." board of managers, Church Mission of Help, January 16.

"Looking Into Your Child's Mind." Parent-Teachers' Association, School No. 9, January 16.

"Treatment in State Hospital." District State Health Officers' Conference, February 25.

"Activities of a State Hospital." Women's Alliance First Unitarian Church, Buffalo, February 21.

"Functions of a State Hospital." University of Buffalo sociology classes, March 13.

- "Syphilis and Mental Health." Contribution to a symposium on the control of syphilis, Buffalo Social Hygiene Society, May 7.
- "Summer Camps as a Mental Hygiene Influence." Counselors Jewish Fresh Air Camp, June 24.
- Wm. E. Cudmore, M. D., senior assistant physician.
- Presentation of psychogenic cases. District No. 1, New York State Nurses' Association, February 4.
- "Methods of Admission to a State Hospital." District State Health Officers' Conference, February 25.
- Discussion and presentation of psychotic twins. Meeting of the Buffalo Neuropsychiatric Society, February 27.
- H. E. Faver, M. D., senior assistant physician.
- "Child Guidance Clinics." District State Health Officers' Conference, February 25.
- B. G. Schutkeker, M. D., senior assistant physician.
- Discussion and presentation of case of suspected chorea. Diagnosis? Etiology? Meeting of the Buffalo Neuropsychiatric Society, February 27.
- "Behavior Problems in School Children." Batavia Teachers' Association, April 30.
- David Ruslander, M. D., senior assistant physician.
- Presentation of organic cases. District No. 1, New York State Nurses' Association, February 4.
- Discussion and presentation of two cases of chronic encephalitis with early symptoms, predominately those of functional psychoses. Meeting of the Buffalo Neuropsychiatric Society, February 27.
- Presentation of cases of psychoses in children. Psychology and mental hygiene classes of State Teachers' College, June 4.
- Iona B. Riedel, principal, school of nursing.
- "Mental Nursing." District No. 1, New York State Nurses' Association, February 4.
- "Nursing Activities in State Hospitals." Psychology and mental hygiene classes of State Teachers' College, June 4; and University of Buffalo sociology classes, March 13.
- Theresa E. Pratt, chief occupational therapist.
- "Occupational Therapy, Recreation and Physical Education in State Hospitals." District No. 1, New York State Nurses' Association, February 4.

"Occupational Therapy Activities in State Hospitals." University of Buffalo sociology class, March 13; and psychology and mental hygiene classes of State Teachers' College, June 4.

Maud A. Burns, social worker.

"Parole and After-Care." District State Health Officers' Conference, February 25.

CENTRAL ISLIP

Arthur G. Rodgers, M. D., clinical director.

"Why Patients Return from Parole." Read a paper at the Interhospital Conference, Psychiatric Institute, New York City, on April 9, 1936.

Frederick Rosenheim, M. D., senior assistant physician.

"Behavior Problems in Children." Talk to the Parent-Teachers' Association, West Islip, February 6, 1936.

"Rejection of Children." Address to Long Island Psychiatric Society at the Central Islip State Hospital on March 17, 1936.

"The Psychology of Everyday Life." Gave a series of eight lectures to the parents and teachers at Patchogue, L. I., from March 24, 1936 to May 19, 1936.

"Human Nature." Gave a talk to the Parent-Teachers' Association, Sayville, L. I., on April 2, 1936.

"Therapeutic Possibilities of a Rural State Hospital Child Guidance Clinic." Read a paper at the Interhospital Conference, Psychiatric Institute, New York City, on April 9, 1936.

"Reciprocal Relations Between Society and the Individual." Read a paper at the Region Conference of the New York City Conference of Social Workers held at the Central Islip State Hospital, on April 30, 1936.

"Psychology of Everyday Life." Gave a talk to the District Convention of Nurses, Long Island District, held at the Central Islip State Hospital on May 26, 1936.

"Problems of Youth." Gave a talk to the adult education class, Patchogue, L. I., on May 28, 1936.

Sara L. Smalley, M. D., senior assistant physician.

"A Comparative Survey of Mental Clinics." Read a paper at the Interhospital Conference, Psychiatric Institute, New York City, on April 9, 1936.

Mrs. Ethel B. Bellsmith, social worker.

"Adequacy of Present Community Resources." Read a paper at the Interhospital Conference, Psychiatric Institute, New York City, on April 9, 1936.

CREEDMOOR

Charles Buckman, M. D., clinical director.

Lecture on "Methods of Admission, General Administration, Care and Treatment of Patients in a State Hospital" to students of Adelphi College, January 13.

Frank M. Criden, M. D., senior assistant physician.

Paper read at the institute on "Results and Evaluation of Psychotherapy in a General Hospital Dispensary," April 10.

Frank B. Glasser, M. D., senior assistant physician.

Paper read at the institute on "A Study of Patients Returned from Parole," April 10.

Jesse L. Bennett, M. D., assistant physician.

Series of four lectures on "First Aid" to Boy Scouts, Flushing Branch, February and March.

Josephine V. Cooper, social worker.

Lecture on "Scope and Function of Social Service Department in a State Hospital," with illustrative cases, January 6.

GOWANDA

Earle V. Gray, M. D., superintendent.

"Insanity and Mental Hygiene," before the Jamestown Bar Association, January 9, 1936.

"Comments on Procedure of Commitment to Civil State Hospitals," at meeting of the New York State Homeopathic Medical Society, at Middletown, April 25, 1936.

Ralph W. Bohn, M. D., director of clinical psychiatry.

"The Pastor in Psychiatry," before the Ministerial Alliance of Jamestown, January 14, 1936.

"The Future of Psychiatric Clinics," at the Survey Club of Jamestown, January 15, 1936.

"The Influence of Parental and School Attitudes on Child Behavior," before the Parent-Teachers' Association of Westfield, March 3, 1936.

- "A Healthy Mind in a Healthy Body," at combined meeting of the North Side Parent-Teachers' Association and the High School Study Club of Falconer, March 9, 1936.
- "What About Your Children?" at the Presbyterian congregation and the Allegany County Welfare Department, at Cuba, N. Y., March 26, 1936.
- "The Public Welfare Nurse and Mental Hygiene," at a luncheon of the Erie County Public Welfare Nurse Association, Buffalo, N. Y., April 24, 1936.
- "Mental Hygiene in Education," at a supper meeting of the Forestville High School faculty, April 28, 1936.
- "Psychiatry and Criminology," to the class in criminology at the Cattaraugus Collegiate Center, on May 7, 1936.
- "Treatment of Incipient Mental Disorders," Pennsylvania State Extension School classes in psychology, at the hospital, May 23, 1936.
- "The Influence of Family Relations," at the Eden Parent-Teachers' Child Study Club, May 28, 1936.
- "Your Interest in Mental Health," before the Little Valley Men's Club, June 16, 1936.
- "The Modern Attitude Toward Mental Illness," at the convention of the American Institute of Homeopathy, June 22, 1936.

HARLEM VALLEY

John R. Ross, M. D., superintendent.

- "Civil Service in the State Hospital System." Talk before League of Women Voters, Dover Plains, N. Y., January 29, 1936.

M. M. Grover, M. D., first assistant physician.

- "A Study of Cases of Folie à Deux." Paper read before the meeting of the Dutchess County Psychiatric Society, April 16, 1936.

Same paper was read at the meeting of the American Psychiatric Association, St. Louis, Mo., May 7, 1936.

R. H. Hutchings, Jr., M. D., first assistant physician.

- "Special Classes—Organization and Aims." Talk before Board of Education, Yorktown Heights, N. Y., March 19, 1936.
- "Pupils' Behavior as Reflecting Parental Attitudes." Talk before Mother's Study Group, Yorktown Heights, N. Y., March 19, 1936.
- "Psychological Implications of World Peace." Talk before Dutchess County American Legion, Poughkeepsie, N. Y., March 18, 1936.

H. A. LaBurt, M. D., director of clinical psychiatry.

"Mental Illness—Methods of Admission to State Hospitals." Talk before meeting of department of public welfare of Putnam County, Carmel, N. Y., May 21, 1936.

"Mental Hygiene—Its Use and Abuse." Lecture and discussion leader at Regional Conference on Social Welfare, Lake Mahopac, N. Y., June 10, 1936.

"Problems of Mental Health." Talk before meeting of Patterson-Kent Health Association, Patterson, N. Y., June 18, 1936.

A. Gaulocher, M. D., senior assistant physician.

"Psychosis in Adolescence." Paper read before meeting of the Dutchess County Psychiatric Society, April 16, 1936.

Edward W. Briggs, Jr., M. D., assistant physician.

"Surgical Problems in Psychiatric Patients." Paper read before meeting of the Dutchess County Psychiatric Society, April 16, 1936.

HUDSON RIVER

John Y. Notkin, M. D., director of clinical psychiatry.

"Oxygen Consumption in Organic Psychosis." Paper read at the annual meeting of the New York State Medical Society, New York City, on April 28, 1936.

"Basal Metabolism in Organic Psychosis." Paper read at the annual meeting of the American Neurological Association, Atlantic City, June 3, 1936.

Charles E. Niles, M. D., senior assistant physician.

Clinical demonstration at this hospital given to a class of the nurses' training school of the Kingston City Hospital, on April 22, 1936.

Solon C. Wolff, M. D., senior assistant physician.

Lecture to the nurses of the senior class at Vassar Brothers Hospital on mental deficiency in children, on January 7, 1936.

A talk was given to the Social Circle of the Dutch Reformed Church at the home of Dr. Easton, 18 South Randolph Ave., Poughkeepsie, N. Y., on January 15, 1936.

A series of lectures on mental hygiene were given to the teachers of the Fairview and Viola schools, from January to May, 1936.

A talk was given to a group of the parent-teachers of the Poughkeepsie High School, on the problems of adolescence, on March 25, 1936.

A talk was given to the Nurses' 'Alumnae Association at Avery Home, on mental hygiene for nurses, on March 30, 1936.

"Child Guidance Work of a State Hospital." Paper read at the Interhospital Conference, held at the Psychiatric Institute, April 9-10, 1936.

A demonstration clinic was given to 25 students from Bard College, accompanied by Professor Carpenter, on May 6, 1936.

A clinical demonstration was given to a group of 10 students and Professor Carpenter of Bard College, on May 25, 1936. Three cases, two of paranoid dementia and one of manic-depressive were presented.

Frederick J. DeNatale, M. D., senior assistant physician.

"Rehospitalization of Parole Patients. Causes and Remedies." Paper read at Interhospital Conference held at the Psychiatric Institute, April 9-10, 1936.

Lloyd E. Watts, M. D., senior assistant physician.

"A Case of Osteitis Deformans (Paget's Disease) with Mental Manifestations." Paper read before the Dutchess County Medical Society, on January 8, 1936.

Isaac N. Wolfson, M. D., senior assistant physician.

"Psychotherapy of a Psychoneurotic Patient in an Out-Patient Department." Paper read at the Interhospital Conference, held at the Psychiatric Institute, April 9-10, 1936.

Arthur J. Leader, senior assistant physician.

"Pick's Disease with Report of a Case." Paper read before the Dutchess County Psychiatric Society, March 19, 1936.

Joseph J. Doltolo, assistant physician.

"A Case of Osteitis Fibrosa Cystica with Mental Symptoms." Paper read at a meeting of the Dutchess County Medical Society, January 8, 1936.

Robert A. Savitt, assistant physician.

"A Case of Pyromania." Paper read before the Dutchess County Psychiatric Society, March 19, 1936.

James P. Kelleher, M. D., first assistant physician.

Clinical demonstration of types of mental illness, given for Professor M. F. Washburn and a class of 25 students of psychology, on May 2, 1936.

KINGS PARK

A. C. Matthews, M. D., first assistant physician.

"Health." Addressed the League of Health Education of New York, January 16, 1936.

Patricia Steen, M. D., senior assistant physician.

"The Aim and Function of the Mental Hygiene Clinic." Addressed the students and community social workers of Mineola and Hempstead, at Adelphi College, Garden City, L. I., February 17, 1936.

"Working for Mental Health in the Community." Addressed the Council of Parent-Teacher Association, Southside High School, Rockville Centre, L. I., February 24, 1936.

Joseph Haley, M. D., assistant physician.

"Mental Hygiene of the Pre-School Child." Addressed the District Nursing Association, Lawrence, L. I., April 20, 1936.

Lewis R. Wolberg, M. D., assistant physician.

"Hematoporphyrin Therapy in Involution Melancholia." Read a paper at the American Psychiatric Association meeting at St. Louis, Mo., the week of May 4, 1936.

"Function of Mental Hospitals in the Community." Addressed the Men's Club, Temple Israel, Freeport, L. I., May 21, 1936.

MANHATTAN

Nobe E. Stein, M. D., senior assistant physician.

Lectured with clinical demonstrations on manic-depressive psychoses and schizophrenia to a group of student from New York University, January 10; on organic psychoses, March 23 and 30; on psychopathic personality and psychoneuroses, April 6; on schizophrenia, April 13; on functional psychoses, April 15.

Maxwell I. Bloomfield, M. D., senior assistant physician.

Gave a clinical demonstration of psychiatric cases to a group of school teachers from the Boro-Wide Teachers' Association, Brooklyn, N. Y., March 14.

Gave a clinical demonstration of the functional and organic psychoses to a group of students from Yale University, April 25.

Eugene Davidoff, M. D., senior assistant physician.

On invitation of the board of the Hospital for Joint Diseases, gave a talk to the internes of that hospital on "The Relation of Psychiatry to Medicine, with Special Reference to Orthopedics," February 4.

Gave two clinical demonstrations of psychiatric cases to two groups of students in psychology, College of the City of New York, March 20 and 27.

Clinical presentation at the Neurological Conference of the Hospital for Joint Diseases. Title of paper, "Psychogenic Aspects and Psychotherapy in a Neurosis Associated with Chronic Somatic Disorder," March 27.

Gave a clinic to a group of students of the abnormal psychology class of the city of New York, April 17.

"Gliogenous Tumors." Paper read at the Neuropathological Conference at Mt. Sinai Hospital, April 30.

"The Course and Treatment in Traumatic Psychoses." Paper prepared in collaboration with Dr. Paul Hoch, medical interne, and read at the annual meeting of the American Psychiatric Association, St. Louis, Mo., May 6.

"Modern Concepts of the Personality." Lecture to the Psychology Club of the College of the City of New York, May 21.

Paul Hoch, M. D., medical interne.

Lectured with clinical demonstrations on major psychoses to a group of students from the city educational department, March 7.

"Psychosomatic Aspects and Psychogenic Sequelae Following Encephalitis." Lecture at the neurological meeting, Hospital for Joint Diseases, April 24.

"The Course and Treatment in Traumatic Psychoses." Paper prepared in collaboration with Dr. Eugene Davidoff, senior assistant physician, and read at the annual meeting of the American Psychiatric Association, St. Louis, Mo., May 6.

MARCY

William W. Wright, M. D., superintendent.

"Neurology in General Practice." Illustrated lecture with presentation of cases at the monthly meeting of the staff of St. Elizabeths Hospital, Utica, N. Y., February 5.

Sidney W. Bisgrove, M. D., first assistant physician.

"Mental Health." Address before the Men's Club of Baptist Church, Whitesboro, N. Y., January 27.

"The State Hospital." Address before the Masonic Club of Whitesboro, N. Y., February 10.

Neil D. Black, M. D., acting director of clinical psychiatry.

"Mental Hygiene Clinic and Your Community." Address at the luncheon meeting of the Service Club, Herkimer, N. Y., January 22.

John A. Howard, M. D., senior assistant physician.

"Therapy in Mental Hygiene Clinics." Paper read at the Interhospital Conference at Utica, April 17.

Anna A. Gronlund, M. D., senior assistant physician.

"Psychiatry." Lecture to the nurses of Broad Street Hospital, Oneida, N. Y., February 24.

"Child Guidance Clinic Activities." Paper read at the Interhospital Conference at Utica, April 18.

Charles Kleiman, M. D., assistant physician.

Discussion of the paper "Perivascular Drainage for Treatment of Infections of the Central Nervous System," by Dr. George Retan of Syracuse; before the Utica Academy of Medicine, Utica, January 16.

Series of five lectures on mental hygiene to a special class at the Y. W. C. A., Utica, completed February 24.

Lucy M. Cobb, M. D., medical interne.

"Mental Hygiene." Address before Parent-Teachers' group at Roosevelt School, Utica, January 14.

"The Wheel of Life." Address at New Century Club, Utica, March 31.

"Foundation for a Good Maturity." Address before the Girl Reserves in Syracuse, April 2.

Series of five lectures to a special class at the Y. W. C. A., Utica, on "Our Emotions;" completed February 29.

MIDDLETOWN

P. Henri Faivre, M. D., senior assistant physician, and

Benjamin A. Schantz, M. D., senior assistant physician.

"A Clinic Program." Paper presented at the Psychiatric Institute, April 9, 1936.

Papers read at extension course for local health officers at Middletown State Homeopathic Hospital, May 27, 1936:

Ray W. Moody, M. D., first assistant physician.

"Discussion of the Various Methods of Admission to a State Hospital."

Murray Bergman, M. D., senior assistant physician.

"Responsibilities of the Local Health Officer Under the Mental Hygiene Law."

Walter A. Schmitz, M. D., clinical director.

"The Medical Study and the Treatment of Patients."

Benjamin A. Schantz, M. D., senior assistant physician.

"Parole, After-Care and Child Guidance Clinics."

Max Unger, M. D., senior assistant physician.

"Function of a State Child Guidance Clinic." Paper presented at the Psychiatric Institute, April 9, 1936.

PILGRIM

Kenneth Keill, M. D., first assistant physician.

"Hospitalization of Mental Cases." Address before Southside Clinical Society, May 20, 1936.

Arthur E. Soper, M. D., first assistant physician.

"Borderline Mental Cases." An address before Town Welfare Officers' Association of Suffolk County at Smithtown, L. I., March 10, 1936.

Constance M. Barwise, M. D., senior assistant physician.

"How the Psychiatrist Helps Children with Their Everyday Problems." Address to Parent-Teachers' Association, Archer Street School, Freeport, L. I., January 7, 1936.

"Relation of Child Guidance Clinic to the School." Address to teachers of Church Street School, Baldwin, L. I., March 2, 1936.

ROCHESTER

Under the heading of lectures the staff generally participates in the teaching of undergraduate nurses. This group consists of our own students, the affiliate students and students from all of the general hospitals in Rochester who may attend these lectures. The superintendents of the training schools of all hospitals in this vicinity are kept informed as to lectures and clinics that are scheduled for the training school and these facilities are made available to them. The junior medical students of the University of Rochester receive their clinical demonstrations and coordinating lectures in psychiatry throughout the school year which are given by Dr. Streeter, director of clinical psychiatry. This summer we have three divinity students from the Colgate-Rochester Divinity School under our direction and guidance.

Address and Lectures

J. L. Van De Mark, M. D., superintendent.

"How a State Hospital Functions." St. Thomas Community Men's Club, Rochester, February 4.

F. D. Streeter, M. D., director of clinical psychiatry.

"General Psychiatry." Department of child study, department of education, Rochester, April 20.

"Abnormal Psychology." Rochester Association for Deaf, April 23.

"Parole Clinic Problems." Interhospital Conference at Utica, April 24-25.

Christine M. Stewart, principal, school of nursing.

"A Discussion of Recent Popular Literature on Mental Hospitals." To women's group, Chamber of Commerce, Rochester, February 6.

"The Making of a Leader." Talk to the graduating class of Highland Hospital, Rochester, N. Y., May 25.

ROCKLAND

Leo P. O'Donnell, M. D., director of clinical psychiatry.

"Some Observations in Scarlet Fever Epidemic Among Adults at the Rockland State Hospital." Paper written by Drs. L. P. O'Donnell before the Rockland County Medical Society meeting at the Rockland State Hospital, April 22.

Wm. R. Strutton, M. D., pathologist.

"General Pathology and Its Relation to Biology." Address before the Mendel Biological Society, St. Peter's College, Jersey City, N. J., January 7.

Frank F. Tallman, M. D., senior assistant physician.

"Problems in the Kindergarten." Address before the kindergarten organization of Mount Vernon, N. Y., February 5.

"The Purpose of Child Guidance Clinics." Address before the Rotary Club of Pearl River, N. Y., February 10.

"Mental Hygiene in Education." Address given before the Washington Institute of Mental Hygiene, Washington, D. C., February 26.

"Our Attitude Towards Mental Health." Address before the economics class of the Pearl River High School, Pearl River, N. Y., March 26.

"Child Guidance in Schools." Address before the American Psychiatric Association Convention in St. Louis, Mo., May 1.

"The Rôle of Child Guidance in Pediatrics." Address before the senior medical students at the University of Ohio, Cincinnati, Ohio, May 9.

"Child Guidance from the Standpoint of the General Practitioner." Address before the Ramapo Clinical Club at Nyack, N. Y., May 15.

Charlotte Munn, M. D., senior assistant physician.

"The Problems of the Normal Child." Address before the Parent-Teacher Association of Blauvelt, N. Y., January 3.

"The Child and His Parents." Address before the Parent-Teacher Association of the Isaac E. Young Junior High School of New Rochelle, N. Y., January 21.

"The Emotional Life of the Child." Address before the Mothers' Forum held at the St. George Hotel, Nyack, N. Y., January 31.

"Personalities." Address before the Parent-Teacher Association of Stony Point, N. Y., February 5.

"Why We Behave as We Do." Address before the Rotary Club of Nyack, N. Y., February 26.

"Parental Attitude Towards Children." Address before the Apollo Book Club, Nyack, N. Y., March 12.

"Mental Hygiene and Our Minor Mental Ills." Address before the Parent-Teacher Association of Spring Valley, N. Y., March 30.

"Psychiatric Aspects of Birth Control." Address before the National Committee on Federal Legislation for Birth Control held at Nyack, N. Y., March 31.

"The Development of a Personality." Address before the Parent-Teacher Association of Tappan, N. Y., April 2.

"Why We Behave as We Do." Address before the Rotary Club of Pearl River, N. Y., April 20; before the Parent-Teacher Association of Spring Valley, N. Y., April 21; before the Parent-Teacher Association of Suffern, N. Y., April 27.

"Personality in the Making." Address before the Parent-Teacher Association of Hawthorne, N. Y., April 20.

"How We Become Ourselves." Address before the Parent-Teacher Association of Spring Valley, N. Y., April 20.

"Mothers as People." Address before the Parent-Teacher Association of Mamaroneck, N. Y., April 25.

"Parents as People." Address before the Parent-Teacher Association of Spring Valley, N. Y., May 4.

- "The Child's Problems: His Parents." Address before the Dunwoodie Teachers' Association of Yonkers, N. Y., May 7.
- "Influence of Our Family Life Upon Us." Address before the Parent-Teacher Association of Spring Valley, N. Y., May 11.
- "Maternal Care and Child Welfare." Address before the Legion Auxilliary of Sparkill, N. Y., May 12.
- "Children." Address before the Parent-Teacher Association of North Tarrytown, N. Y., May 18.
- "The Christian Religion as a Balancing or Unbalancing Factor in Our Lives." Address before the Dutch Reform Church, Spring Valley, N. Y., May 20.
- "Questions Parents Ask." Address before the Parent-Teacher Association of Spring Valley, N. Y., May 25.
- "Mental Hygiene as a Correlating Faction in the Planned Community." Address before the Metropolitan Parent-Teacher Congress, White Plains, N. Y., June 3.
- "The Work of a Mental Hospital." Address before the medical staff of the Good Samaritan Hospital, Suffern, N. Y., June 16.

Joseph Lander, M. D., assistant physician.

- "General Impressions of the Soviet Union." Address before the Naurashan Men's Club, Pearl River, N. Y., January 8, and before the Rotary Club of Suffern, N. Y., January 9.
- "The Causes of Mental Illnesses." Paper read before the Rotary Club of Spring Valley, N. Y., April 1, and before the New Era Club, 274 East Broadway, New York City, April 10.

Ed Rucker Clardy, M. D., assistant physician.

- "The Part of Dramatics in the School Curriculum." Address before the Nyack Parent-Teacher Association, January 28.
- "Adolescence and Delinquency." Address before the Y. M. C. A. of Port Chester, N. Y., March 16.
- "Character Training." Address before the Parent-Teacher Association of Nanuet, N. Y., April 7.
- "Habit Training." Address before the Garnerville School, Garnerville, N. Y., April 24.
- "Child Guidance, Mental Hygiene and Education." Address before the Nanuet School, Nanuet, N. Y., May 8.
- "Mental Hygiene and Child Guidance." Address before the Jewish Community Center, Spring Valley, N. Y., June 30.

Isidor Scherer, physical instructor.

"Physical Education for the Mental Handicapped Individual." Address before the New York University, department of physical education, New York City, January 10.

ST. LAWRENCE

Harold H. Berman, M. D., director of clinical psychiatry.

"Psychoneuroses." Paper read by Gladys G. Giffin, assistant principal, at a meeting of the New York State District Nurses' Association, District No. 6, Incorporated, at Curtis Hall, on January 8, 1936. Forty-five members from Lewis, Jefferson and St. Lawrence counties attended.

"Functional Psychoses." Lecture and clinical demonstration to students of Prof. Charles A. Rebert's class in abnormal psychology, St. Lawrence University, Canton, at Curtis Hall, St. Lawrence State Hospital, January 17, 1936.

"Psychiatric Significance of School Failures." Paper read at Inter-hospital Conference, Utica, N. Y., April 18, 1936.

"The Functions of Your State Hospital." Talk before Women's Study Club at Theresa, N. Y., April 27, 1936.

James E. Brown, M. D., senior assistant physician.

"Organic Psychoses." Lecture and demonstration to the students of Professor Charles A. Rebert's class in abnormal psychology, St. Lawrence University, Canton, at Curtis Hall, St. Lawrence State Hospital, January 17, 1936.

Irene Cunningham, chief occupational therapist.

"The Revival of Early American Crafts." Demonstration and talk to students at the Washington School, Ogdensburg, N. Y., on February 21, 1936.

"The Purpose of Occupational Therapy." Talk given at the Regional Conference of State and County Social Welfare Workers held at the Hotel Woodruff, Watertown, N. Y., April 16, 1936.

UTICA

Ross D. Helmer, M. D., first assistant physician.

"What Chance for the Retarded or Gifted Child." Address before the Parent-Teacher Association of West Hill school, Ilion, N. Y., January 16.

"When and How to Commit Patients to a State Hospital." Address before the medical staff of Utica Memorial Hospital, Utica, N. Y., February 4.

"Present Day Facts Concerning Mental Hygiene." Address given before the Women's Club of Westminster Church, Utica, N. Y., March 18.

"Health." Address given before the Parent-Teacher Association of Forestport, N. Y., April 29.

Clarence L. Russell, M. D., pathologist.

"Neuroblastomas of the Adrenals." Address given before the staff of the Utica Memorial Hospital, Utica, N. Y., January 7.

Newton J. T. Bigelow, M. D., acting director of clinical psychiatry.

"Certain Problems of Childhood." Address before the Parent-Teacher Association of the Waterville Central High School, Waterville, N. Y., January 6.

"Personality Development." A series of four lectures given to the Utica Council of Social Agencies, Y. M. C. A., Utica, N. Y., on January 13, 20 and 27 and February 3.

"Emotion Versus Nutrition." Address before the Parent-Teacher Association, Whitesboro High School, Whitesboro, N. Y., February 5.

"Certain Problems of Childhood." Address given before the Parent-Teacher Association and child study group, Hamilton Central School, Hamilton, N. Y., May 11.

"Clinic Management of Adolescent Problems." Address given at the Up-State Interhospital Conference, Utica State Hospital, Utica, N. Y., April 18.

Anna J. Gosline, M. D., senior assistant physician.

"Personality Development and Physical Health." Two lectures, and discussions, given at the Industrial Club of the Y. W. C. A., Utica, N. Y., January 22 and February 5.

Oswald J. McKendree, M. D., assistant physician.

"Psychiatric Clinic Organization and Problems." Address given at the Up-State Interhospital Conference, Utica State Hospital, Utica, N. Y., April 17.

Duncan Whitehead, M. D., assistant physician.

"Cooperation of Clinics and Community Agencies." Paper read at the Up-State Interhospital Conference, Utica State Hospital, Utica, N. Y., April 17.

Cyril J. C. Kennedy, M. D., assistant physician.

"Analysis of Factors Leading to Return from Parole." Paper read at Up-State Interhospital Conference, Utica State Hospital, Utica, N. Y., April 17.

Lena A. Kranz, R. N., principal of the school of nursing.

"The Nursing Profession and the Opportunities in the Field of Nursing." Address given to two groups of students at the West Winfield High School, West Winfield, N. Y., May 21.

WILLARD

Harry J. Worthing, M. D., superintendent.

"The Problem Child and His Environment." Address to Parent-Teachers' Association, Montour Falls, May 14.

Ross E. Herold, M. D., director of clinical psychiatry.

Mental clinic to 24 students from Wells College, April 13, at hospital.

Address on "Mental Hygiene" to T. E. R. A. social workers, at Ithaca, April 14.

Mental clinic to 51 students from Cornell University, at hospital, May 9.

Benjamin Pollack, M. D., senior assistant physician.

Mental clinic to 14 student nurses from Auburn City Hospital, May 5.

SYRACUSE PSYCHOPATHIC

Harry A. Steckel, M. D., director.

"Child Training—Past and Present." Informal talk before Fidelis class, First M. E. Church, Syracuse, N. Y., January 5, 1936.

"Harnessing Our Emotions." Address before Men's Club, First Presbyterian Church, Fulton, N. Y., January 14, 1936.

"General Aspects of Mental Hygiene." Address before Business Women's Group of First M. E. Church, at Syracuse, N. Y., February 27, 1936.

"Emotional Aspects of Mating." Lecture in series of talks on marriage under auspices of Syracuse University, Syracuse, N. Y., March 13, 1936.

"The Potential Psychotic—His Development in the Public Schools and Fruition in the College." Paper read before the sixth annual meeting of the New York Student Health Association, Syracuse, N. Y., March 25, 1936.

"Emotional Aspects of Marriage." Lecture in series of talks on marriage under auspices of Syracuse University, Syracuse, N. Y., April 3, 1936.

"Mental Hygiene and Pastoral Work." Clinic and discussion before Episcopal clergymen of Syracuse area, Syracuse, N. Y., April 28, 1936.

The following lectures before the special study group of the First M. E. Church at Syracuse, N. Y.

"Public Health and Economic Aspects of Mental Hygiene." May 6, 1936.

"Activities of the Syracuse Psychopathic Hospital." May 13, 1936.

"Child Guidance." May 20, 1936.

"The Syracuse Psychopathic Hospital." Radio talk, Station WFBL, Syracuse, N. Y., under auspices of the Onondaga County Medical Society and Syracuse department of health, June 12, 1936.

STATE INSTITUTIONS

CRAIG COLONY

Wm. T. Shanahan, M. D., superintendent.

Addressed the Dansville Rotary Club, on colony care of epileptics, on March 14.

Glenn J. Doolittle, M. D., senior assistant physician:

Presented the following clinics:

On April 23, to Geneseo Normal School students.

On April 28, to a class from Houghton College.

On May 3, to the junior class of the medical department of the University of Buffalo.

On May 17, to a group of 50 students from Niagara University.

LETCHWORTH VILLAGE

Edward J. Humphreys, M. D., director of research.

Following lectures given before the New York State Association of Occupational Therapists, New York City, March 6, 13 and 20, 1936:

"What Factors of the Patient's Personality Face the Occupational Therapist in the Rehabilitative Process?"

"What Factors of Personnel and Organization of the Occupational Therapy Department Face the Patient in His Struggle for Adaptation?"

"What is a Psychotherapeutic Occupational Technique and How May It Help to Develop the Field of Occupational Therapy?"

Elaine F. Kinder, Ph. D., research psychologist.

"Variations in Performance on Subtests of the Stanford-Binet Scale of a Group of Letchworth Village Subjects Retested Over a Six-Year Period." Paper read at meeting of the New York Branch, American Psychological Association, April, 1936.

Eugene W. Martz, M. D., first assistant physician.

"Some Basic Principles of Child Training." A lecture before the Camp Hill Parent-Teachers' Association of Pomona, N. Y., April 14, 1936.

"Parents' Problems." An address given at the annual banquet of the Tomkins Cove Parent-Teachers' Association, June 9, 1936.

NEWARK

H. G. Hubbell, M. D., clinical director.

Clinical demonstration and lecture to students from University of Rochester, April 24, 1936.

Clinical demonstration and lecture to students from Genesee Normal, May 7, 1936.

Clinical demonstration and lecture to students from Keuka College, Keuka, May 11, 1936.

Demonstration, by movies, on "Family Care" before the Wayne County Medical Society, Newark, April 14, 1936.

Lois A. Whitfield, chief physical therapist.

Lecture on "Spastic Paralysis," illustrated by movies before the Wayne County Medical Society, April 14, 1936.

SYRACUSE PSYCHOPATHIC HOSPITAL

Mary F. Brew, M. D., assistant director.

"What the Syracuse Psychopathic Hospital Is Doing for the Syracuse University Students." Talk to a group of physicians and educators at Cornell University, Ithaca, N. Y., May 21, 1936.

"Factors in Mental Maladjustment." Talk before Zonta Club of Syracuse, N. Y., June 18, 1936.

Mrs. Elinor S. Noetzel, chief social service worker.

"Functions of Psychopathic Hospital in the Community." Address before intermedical committee of Welfare Council at Y. W. C. A., in January, 1936.

"Care and Prevention of Mental Illness." Addressed Catholic Women's Auxiliary of Cathedral Church, Syracuse, N. Y., in January, 1936.

"Mental Hygiene of School Life." Address given before parent-teachers association at Fabius High School, Fabius, N. Y., on April 21, 1936.

Miss Mary G. Dempsey, assistant social service worker.

"Psychiatric Social Work." Address given before student nurses of University Hospital in February, 1936.

Harold M. Hildreth, Ph. D., psychologist.

"Mental Health and Difficulties of the Times." Talk to the Men's Club, Immanuel Baptist Church, Syracuse, N. Y., January 19, 1936.

"Mental Health and Religion." Address and discussion at Joint Church Forum, Mexico, N. Y., February 2, 1936.

"Nature of Mental Disorder." Talk to the College Club, Park Central Presbyterian Church, Syracuse, N. Y., March 8, 1936.

"Clinical Training and the Theological Curriculum." Talk at a symposium held at Canton Theological School, Canton, N. Y., March 30, 1936.

"Values in the Light of Psychopathology." Address to the student body at St. Lawrence University, Canton, N. Y., March 31, 1936.

"Mental Disorder and Mental Hygiene." Talk at the First Baptist Church, Camillus, N. Y., May 3, 1936.

"Methods of Research in Mental Disease." Paper read before the social science seminar on methodology, Syracuse University, Syracuse, N. Y., May 14, 1936.

SYRACUSE STATE SCHOOL

Charles E. Rowe, M. D., superintendent.

"The Care and Training of Mentally Defective Children." An address on May 19, to members of the Syracuse Academy of Medicine.

S. D. Deren, M. D., first assistant physician.

"The Psychology of the Mentally Handicapped." Lecture given to Prof. Thelin's class, department of psychology, Syracuse University, on January 31.

"Educating and Training the Mentally Retarded Children." Lecture given to a group of 80 teachers engaged in manual and occupational training, on February 4.

"Physical Peculiarities Met with Among the Feeble-minded; Their Mental and Emotional Reactions, as Compared with the Normal Person of the Same Age." Lecture given to a group of student nurses from Memorial Hospital, Syracuse, N. Y., on February 6.

A series of four lectures given to the student in child and adolescent psychology, School of Education, Syracuse University, from February 25-28.

"Feeble-mindedness, Its Causes and Consequences."

"Psychology of the Mentally Handicapped."

"Social Control of the Mentally Deficient."

"Educating and Training the Feeble-minded."

"What Is Feeble-mindedness, and What Can Be Done for the Mentally Deficient?" Lecture given to the students of the Syracuse Collegiate School on March 10.

"Feeble-mindedness; Its Psychological, Sociological and Educational Aspects." Lecture given to Dr. Steckel's class in advanced mental hygiene on April 13.

"Causes of Feeble-mindedness," "Behavior of Feeble-minded During Sickness." Lectures to nurses of Memorial Hospital, Syracuse, N. Y., on April 21.

"Social Control of the Feeble-minded." Lecture given to a group of 37 students of Auburn Collegiate Center on April 24.

"The Feeble-minded Child." Lecture given to a group of teachers of the board of emergency education, on April 30.

"Physical, Mental and Emotional Characteristics of Feeble-minded Persons." Lecture given to the junior medical class of Syracuse Medical College, on May 2.

E. H. Bickle, M. D., senior assistant physician.

"Attitudes of Mentally Deficient Girls in the Institution and Colony." Paper read before the Interhospital Conference at Utica State Hospital, Utica, N. Y., on April 17.

N. K. Bernstein, M. D., medical interne.

"Dispelling Doubts About Medicine in State Institutions." Paper read before members of the Syracuse Academy of Medicine on May 19.

"The Care and Treatment of the Moron." Address to the Knights of Pythias Lodge, Syracuse, N. Y., on May 28.

Caroline A. Schmehl, psychologist.

"The Value of Psychometric Tests." Paper read before the members of Syracuse Academy of Medicine on May 19.

BOOK REVIEWS

Why We Feel That Way. By AUGUSTUS W. TRETTEIN, Ph. D. The Stratford Company, Boston, 1935. 441 pages, bibliography, glossary and index. Price \$3.00.

Before reading far into this book, one is convinced that it has been addressed to the lay reader. To say that the market is flooded with literature (save the mark!) that strives to interpret scientific knowledge for the uninitiated, is not to cast a slur upon honest efforts to enlighten the public. This author has faced a difficult task and has come away with a more satisfactory product than is usually the case; at any rate, he has avoided the sensationalism to which many others have resorted.

Beginning students in psychology, however, are likely to take Dr. Trettein's book in hand with the feeling that they have something quite reliable, in which case they should be disillusioned. It is regrettable that in the glossary one finds inaccuracies that force him to warn the unwary. Faulty impressions will be gleaned from the definitions that may hamper the student in his progress. To quote an example: TRAUMA—*Pertaining to pain*. There are several others. In the face of such vocabulary weakness, how much better it would have been to omit the glossary altogether and to refer the reader to some authoritative reference work. Informed readers will be puzzled and neophytes grievously misled by the title for Chapter XVII: "Crime and Its Emotional Psychosis." It is clear that the author bandies his terms about with little regard for their true connotations.

Reference is made to some commendable authorities, as well as to some who bear little weight. In general, the early student of psychology will welcome the simplification of phrasing; the exposition of the theories of emotions in the 11 pages of Chapter III shows an economy of expression that is essential to orientation. The book will not be of interest to the psychiatrist; the lay reader should add pinches of salt throughout the reading.

The Education of the Slow-Learning Child. By CHRISTINE P. INGRAM. World Book Company, Yonkers-on-Hudson, N. Y. 413 pages. Price \$1.80.

In her illuminating book, the author suggests the term "slow-learning" on the ground that it bears less stigma than do its synonyms "borderline" and "dull-normal." In the attempt to evolve an educational system sensible to individual differences, perhaps it was a necessary evil that so much

attention should be concentrated upon that portion of the school population showing the most extreme abnormalities, to the detriment of the much larger group lying between normality and obvious retardation. The relative incidences of these two groups are stated by the author (quoting Terman's figures of 1916) to be as follows: 2 per cent of the children in an unselected school population are found to have I. Q.'s ranging from 50 to 74; the slow-learning children, with I. Q.'s of 75 to 89, comprise 15 to 18 per cent.

The 2 per cent group is so definitely limited in capacity that it has long been recognized by modern education and has been provided for through the medium of ungraded classes. But in education, as in any other field strongly influenced by individual differences, it is merely cutting the Gordian knot to divide children into two such absolute groups—the normal and the retarded. The distribution of capacities among individuals has proved to be far from clear cut; even in any one individual physical, mental and social traits may each develop at different velocities. Thus, the slow-learning pupils in a non-progressive school system are faced with a double danger; they may have the impossible task of keeping pace with their intellectual superiors, or they may be thrown in indiscriminately with children so inferior to them that whatever potentialities for development they may possess will be hamstrung.

On page 79, the author says, "All the children of all the people enter school at seven years of age, or earlier. This means that the mentally retarded child begins his school career along with normal children on the as yet untested assumption that he has equal ability to that of other children and that he will succeed equally well." The statement is so universally echoed as almost to constitute a platitude, but it certainly bears repeating, for it makes clear to us the enormous problem that faces the educators who, under an avowedly democratic, educational philosophy, backed by statute, are supposed to produce the magic formula of "equal opportunity for all."

In view of the psychoanalytic dictum that the frustrations of early life are reborn in adult conflicts, who can doubt that proper adjustment during the first few years of the school experience is most vital to the later attainment of a balanced personality?

Hope is expressed for the future, however, (page 7) when Miss Ingram says, "As an increasing number of progressive school systems recognize the dull-normal ('slow-learning'—Ed.) and provide suitable programs for them, increasingly fewer of them will be either included in classes for the mentally retarded or left to become discipline problems in the regular grade organization."

The thoroughness of the program of the Rochester, New York, school system in working out these problems is adequately and understandably presented in this book. There are detailed charts showing the physical, mental and social development that is to be expected of this slow-learning group at different age levels. Constructively suggestive are the chapters on "general attainments" and "specific attainments," as well as those on "choice and planning" and "carrying out" of work units.

Ability-grouping is not exclusively a Rochester creation, nor is it of amazingly recent innovation, but the vision and scope of the program outlined by Miss Ingram deserves the attention and esteem of mental hygienists. The mechanical perfection of the book invites the eye and the mind.

Visual Outline of Psychology. By KATE HEVNER, Ph. D. Longmans, Green and Company, New York and Toronto, 1935. 97 pages, including index.

Apparently intended to be the answer to a beginning student's prayer for a condensed, readable approach to a subject fraught with controversy, this combined handbook and notebook achieves a synthesis which has been surpassed in depth, but not in brevity, by others.

Admitting her indebtedness for most of her material to Woodworth, the author follows what she calls "the typically American middle-of-the-road psychology"—an apologetic designation? By far the greatest amount of space is devoted to physiological backgrounds and to educational psychology. It does seem that the writer has let much that is vital slip through her fingers by her limitation of such topics as "Motivation," "Personality, the Self" and "Emotion" to two or three pages each. It is granted that the task of presenting the dynamics of psychology is not an easy one and that the nature of this book does not permit of discussion of the more debatable aspects. Nevertheless, the author's cursory dismissal of Freud betrays a feeble acquaintance with the best literature on the subject. Is it not a bit naïve to say, "It (psychoanalysis) overdoes the unconscious, for most unsatisfied wishes are unanalyzed and unacknowledged but conscious!"

The short item on abnormal psychology is refreshing. So far as the discussion goes, mental disorder is treated with enlightenment. In general, however, the emphasis of the book seems to be upon the products of psychological study which tend to enhance the educative processes; thus, it is recommended wholeheartedly to students who contemplate teaching.

Between each of the printed leaves of this handbook, which is paper-bound, is inserted a blank leaf providing space for notes. Unfortunately there is no bibliography, a grievous omission in the treatment of a field in

which it is folly to be arbitrary. In general this visual outline should be applauded as a contribution to smoothing the path for the novice in psychology, but it is hoped that a later edition, somewhat enlarged, somewhat revised, will offer reference readings on the various chapters.

The Purchase of Medical Care Through Mixed Periodic Payment.

By PIERCE WILLIAMS. The National Bureau of Economic Research, Inc., Washington, D. C., 1932. 301 pages and topical index.

In the autumn of 1929, at the request of the American Medical Association's committee on the costs of medical care, the National Bureau of Economic Research started a survey of the problems considered in this book. The attention currently being accorded the question of "socialized medicine," at least in popular journals, makes this study a valuable reference work. The approach is from the historical, geographical and vocational standpoints, and one obtains a view of various methods that have been employed in meeting the problem. Compulsory insurance, mutual sick benefits, "company" medical service, community hospitals, private group clinics, and other systems are discussed and compared. The work is authoritative and should be invaluable to anyone engaged in the study of community and industrial social programs.

Wealth and Culture. By EDWARD C. LINDEMAN. Harcourt, Brace and Company, New York, 1936. 135 pages, including 70 pages of statistical tables. Price \$3.00.

This eminently frank book is subtitled "A Study of One Hundred Foundations and Community Trusts and Their Operations During the Decade 1921-1930." The significance of choosing the third decade of this century lies in the author's discovery that of the 80 foundations studied, 43 were formed in the years 1921-1930, inclusive; of the 20 community trusts studied, 9 were formed in the years 1920-1929, inclusive.

More stimulating than the array of charts, graphs and statistical tables is Mr. Lindeman's spirited philosophic-economic dissertation, which from chapter to chapter becomes more and more of a battlefield on which he flays right and left the more tenacious adherents of the profits motive and production-economy. It is quite clear that he has placed altruism on the witness stand; that, as prosecutor, he means to let the chips fall where they may. Two quoted statements will illustrate his point of view: "The foundation is a manifestation of collectivism expressing itself on a purely practical level . . . it may be said to be collectivism used as an instrument for the purpose of perpetuating individualism."

In historical perspective, the author maintains that our contemporary "rugged individualism" is the outgrowth of the Civil War, which "destroyed the feudalistic plantation system of agriculture in the south and thereby established the supremacy of northern bourgeois 'capitalism'." The result was the amassing of large fortunes that could not possibly be spent even in the most arrogant luxury and that only tended to be increased through reinvestment in private enterprise. It was only natural that the question would follow. "What shall be done with this surplus wealth?" The unique American answer was the foundation, or trust fund to be used for philanthropic purposes; unique, the author points out, only in its magnitude and complexity, for the notion of the foundation had occurred to the Middle Romans.

Early in the work, we read (with no novelty of experience) that America is in a period of culture-lag. The instruments of civilization (invention, science, technology, industry and urbanization) have outrun our philosophy of values. In the author's usage, "culture" signifies the manner in which these instruments are used and the ends for which they are used. It is time, therefore, he concludes, for America to take stock of its vital processes. Lindeman chides the majority of the foundations for obstructionist tactics: "My first surprise was to discover that those who managed foundations and trusts did not wish to have these instruments investigated." Some idea of how caustic he is may be gained from a portion of his acknowledgments: "Had it not been for the cooperation of this small number of foundation officials who regarded their position as a public function, the study could not have been conducted at all, and I am therefore extremely grateful for their generous collaboration." How trying the situation was can be gathered from his statement that these few collaborators from foundations "would prefer, perhaps, not to be mentioned by name."

If this book were merely a salvo of invective, and nothing more, it could be dismissed for not being constructive. But in "Steps Toward a Cultural Index," Lindeman defines the categories which seem essential to the maintenance of a just and logical philosophy of values.

The 70 pages of statistical tables are informative, showing the distribution of funds of the 100 organizations studied. A briefer picture is given on page 21. Both studies show the year-by-year figures for each recipient function. Education and health, in that order, but fairly equal, receive 76.2 per cent of the benefactions. Social welfare, with 14.4 per cent is third. Recreation, international relations, religion, law and government, and race relations are relatively insignificant. Particularly revealing is the summary of the health budgets of the foundations and community trusts

. . . (physical and public health receive 89.4 per cent, while *mental hygiene receives only 4.5 per cent* of benefactions for health). In view of what has been written about the hospital bed occupancy by patients suffering from nervous and mental diseases, and the apparent need for increased preventive mental hygiene, this finding should be of especial note to workers in the fields of psychiatry and psychiatric social work.

The author calls this a "preliminary volume," saying that "its contents are to be regarded as an over-all view of a few of the more elementary facts and considerations involved." He invites competent socially-minded students to conduct subsequent investigation and he suggests a few topics of greater specificity. It might be said in passing that the book is a typographical gem, its mechanical construction being worthy of no moderate praise.

GENERAL STATISTICAL INFORMATION RELATING TO STATE HOSPITALS, STATE SCHOOLS AND CRAIG COLONY

CENSUS OF JULY 1, 1936

Patient population:

Civil State hospitals:

In hospitals	62,550
In family care	268
On parole	5,567
	<hr/> 68,385

Dannemora and Matteawan 2,277

Private licensed institutions for mental disease 3,712

Institutions for mental defectives:

In institutions proper	11,243
In colonies	1,806
In family care	137
On parole	1,553
	<hr/> 14,739

Licensed institutions for mental defectives 353

Institutions for defective delinquents 1,572

Craig Colony for epileptics 2,442

Grand total 93,480

Certified capacity of civil State hospitals 56,185

Certified capacity of institutions for mental defectives..... 10,766

Certified capacity of Craig Colony for epileptics 1,750

Medical officers in civil State hospitals 367

Medical officers in institutions for mental defectives..... 44

Medical officers in Craig Colony for epileptics 11

Employees in civil State hospitals 12,557

Employees in institutions for mental defectives..... 2,182

Employees in Craig Colony for epileptics 358

GENERAL STATISTICAL INFORMATION

MOVEMENT OF EMPLOYEES IN THE CIVIL STATE HOSPITALS DURING THE YEAR ENDED JUNE 30, 1936

STATE HOSPITALS	In service, July 1, 1935			Engaged			Left service			In service, June 30, 1936			Vacancies, June 30, 1936			Number of patients, excluding paroled, June 30, 1936, to each		
	Medical officers	Ward employees	Other employees	Medical officers	Ward employees	Other employees	Medical officers	Ward employees	Other employees	Medical officers	Ward employees	Other employees	Medical officers	Ward employees	Other employees	Medical officer	Ward employee	Employee
Binghamton	14	305	238	3	85	34	..	75	36	17	315	236	1	10	9	165.4	8.9	5.0
Brooklyn	20	181	208	7	197	57	5	84	40	22	294	225	1	..	2	89.0	6.7	3.6
Buffalo	13	261	196	3	106	33	3	128	27	13	239	202	2	..	14	155.2	8.4	4.4
Central Islip	32	702	360	7	281	58	5	250	56	34	733	362	4	17	25	209.4	9.7	6.3
Creedmoor	15	426	273	6	325	116	2	331	117	19	420	272	..	1	15	199.7	9.0	5.3
Gowanda	10	136	146	4	156	70	2	59	20	12	233	196	2	11	8	171.7	8.8	4.7
Harlem Valley	19	473	259	6	316	81	7	296	71	18	493	269	2	15	7	248.3	9.1	5.7
Hudson River	27	481	391	4	148	55	4	149	50	27	480	396	1	9	..	163.4	9.2	4.9
Kings Park	27	546	462	7	304	133	5	275	107	29	575	488	..	..	..	164.6	8.3	4.4
Manhattan	24	413	368	1	78	73	1	76	83	24	415	358	..	..	..	118.4	6.8	3.6
Marcy	13	271	234	4	85	29	3	66	27	14	290	236	4	..	..	186.3	9.0	4.8
Middletown	19	334	231	..	84	27	1	67	19	18	351	239	3	5	11	179.0	9.2	5.3
Pilgrim	21	603	296	3	625	150	1	449	91	23	779	355	..	..	..	293.6	8.7	5.8
Psy. Inst. and Hosp. ..	17	79	139	6	25	18	11	28	17	12	76	140	5	3	2	12.8	2.0	0.7
Rochester	14	275	193	3	120	41	1	75	30	16	320	204	1	8	6	187.1	9.4	5.5
Rockland	26	511	320	10	343	76	8	293	56	28	561	340	2	29	26	144.1	7.2	4.3
St. Lawrence	12	229	201	4	133	35	4	127	36	12	235	200	4	16	10	171.2	8.7	4.6
Syracuse Psy. Hosp. ..	3	50	23	1	20	6	2	21	8	2	49	21	..	2	2	27.0	1.1	0.8
Utica	10	182	217	3	63	28	2	61	28	11	184	217	1	4	12	151.8	9.1	4.1
Willard	13	295	267	3	47	34	..	46	38	16	296	263	2	9	26	171.8	9.3	4.8
Total	349	6,753	5,022	85	3,541	1,154	67	2,956	957	367	7,338	5,219	35	139	187	176.6*	8.6*	4.9*

*Excluding Psychiatric Institute and Hospital and Syracuse Psychopathic Hospital.

GENERAL STATISTICAL INFORMATION

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MOVEMENT OF PATIENTS IN THE CIVIL STATE HOSPITALS DURING THE YEAR ENDED JUNE 30, 1936, AS REPORTED BY SUPERINTENDENTS, AND STATEMENT OF CAPACITY AND OVERCROWDING, JUNE 30, 1936

STATE HOSPITALS	Census, July 1, 1935	ADMISSIONS				DISCHARGES							Census, June 30, 1936	Certified capacity	OVERCROWDING	
		First admissions	Readmissions	Transfers	Total	Recovered	Much improved	Improved	Unimproved	Not insane	Died	Transferred	Total		Number	Per cent
Binghamton.....	3,021	434	118	1	553	115	69	53	20	13	206	61	537	3,034	421	17.6
Brooklyn.....	1,695	2,063	495	12	2,570	252	121	175	41	3	577	619	1,788	2,477	256	15.0
Buffalo.....	2,905	564	113	9	686	126	97	64	32	1	193	709	1,222	2,369	36	1.8
Central Islip.....	7,501	1,193	321	29	1,533	253	165	80	20	2	284	52	856	7,719	1,406	24.6
Creedmoor.....	4,320	20	10	584	614	193	126	76	14	..	238	52	699	4,235	291	8.3
Gowanda.....	1,446	307	107	710	1,124	78	34	44	37	14	135	7	349	2,221	-46	....
Harlem Valley.....	4,534	570	139	45	754	41	59	40	19	3	278	18	458	4,830	497	12.5
Hudson River.....	4,618	469	193	12	674	121	76	47	31	8	360	10	653	4,639	399	9.9
Kings Park.....	5,092	619	279	102	1,000	174	227	114	48	10	236	75	884	5,208	855	21.8
Manhattan.....	3,605	2,320	260	3	2,583	389	144	109	91	1	838	1,250	2,822	3,366	..	....
Marcy.....	2,864	479	80	25	584	75	82	56	26	24	223	117	603	2,845	468	21.9
Middletown.....	3,186	262	94	310	666	73	49	46	28	12	165	8	381	3,471	2,780	44.2
Pilgrim.....	5,955	246	31	1,273	1,550	30	58	60	15	..	378	39	580	6,925	..	....
Pay. Inst. and Hosp.	267	24	3	294	33	64	70	96	28	3	3	16	302	288	-56	....
Rochester.....	2,855	521	95	210	826	80	69	31	32	16	219	18	463	3,218	246	9.0
Rockland.....	4,427	908	306	11	1,225	148	157	199	66	5	283	323	1,181	4,471	3,750	284
St. Lawrence.....	2,298	277	61	1	349	119	21	26	13	3	186	61	429	2,208	1,721	333
Syracuse Pay. Hosp.	55	562	152	1	715	105	98	47	45	144	13	264†	716	54	60	....
Utica.....	1,839	425	104	9	538	114	57	54	19	32	153	20	449	1,928	334	25.0
Willard.....	2,860	326	99	5	430	54	50	44	6	1	243	13	411	2,879	205	8.1
Total.....	65,372	12,832	3,081	3,355	19,268	2,573	1,823	1,435	699	320	5,211	3,722	15,783	68,385	56,185	6,427*
																11.5*

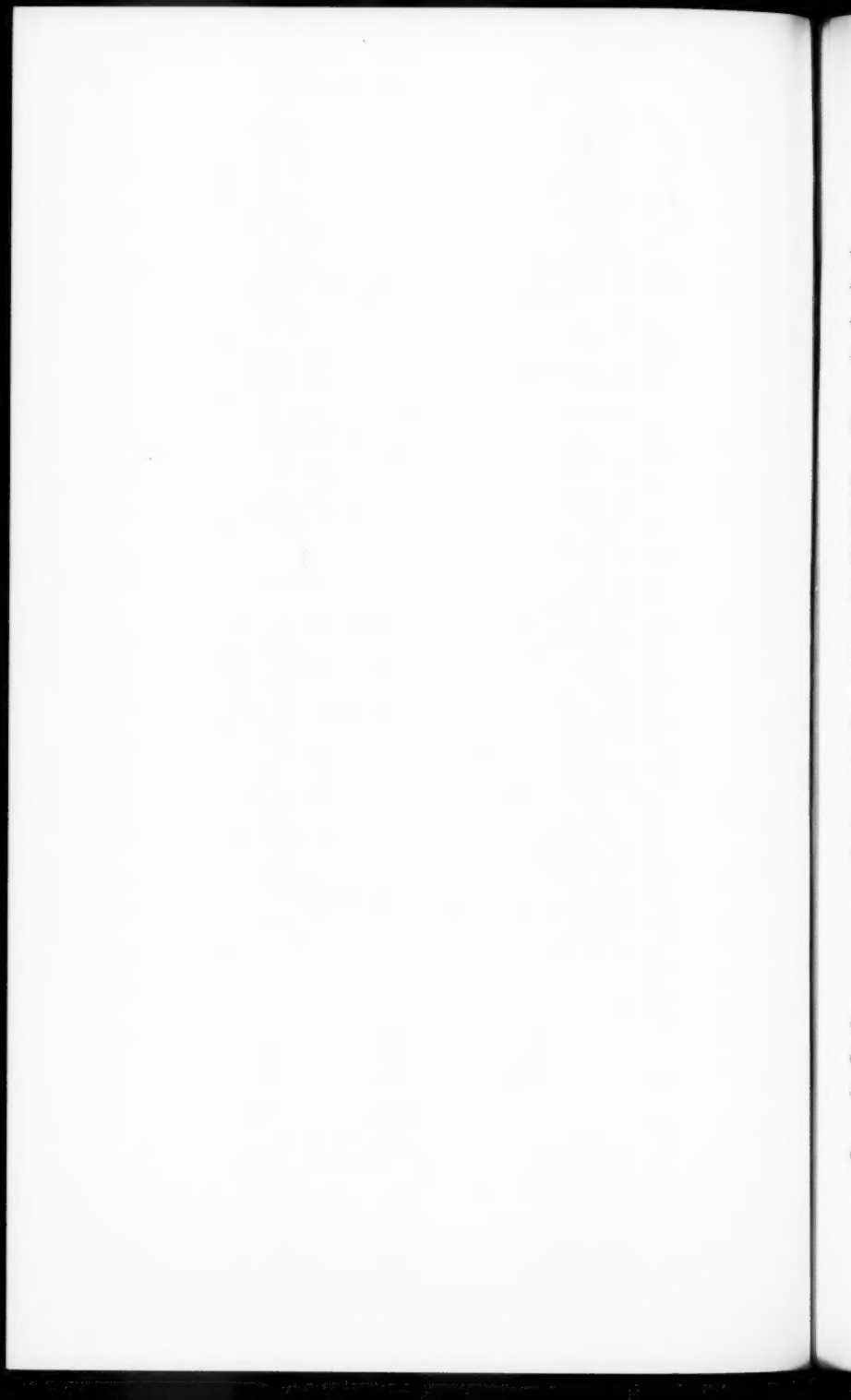
*Excluding Psychiatric Institute and Hospital and Syracuse Psychopathic Hospital. †Committed to other institutions.

MOVEMENT OF EMPLOYEES IN THE STATE INSTITUTIONS FOR MENTAL DEFECTIVES AND EPILEPTICS DURING THE YEAR ENDED
JUNE 30, 1936

STATE INSTITUTIONS	In service, July 1, 1935			Engaged			Left service			In service, June 30, 1936			Vacancies, June 30, 1936			Number of patients, excluding paroles, June 30, 1936, to each		
	Medical officers	Ward employees	Other employees	Medical officers	Ward employees	Other employees	Medical officers	Ward employees	Other employees	Medical officers	Ward employees	Other employees	Medical officers	Ward employees	Other employees	Medical officer	Ward employee	Employee
State Schools for																		
Mental Defectives																		
Letchworth Village.....	10	275	180	3	263	64	2	223	57	11	315	187	2	1	7	307.2	10.7	6.6
Newark	7	193	129	..	65	31	..	63	16	7	195	144	..	7	17	275.7	9.9	5.6
Rome	11	374	173	1	164	77	2	160	62	10	378	188	5	3	8	315.6	8.3	5.5
Syracuse	5	107	132	5	25	19	..	22	19	5	110	132	..	3	4	208.8	9.5	4.2
Wassaic	9	355	149	5	204	41	3	186	30	11	373	160	1	36	23	321.8	9.5	6.5
Total	42	1,304	763	9	721	232	7	654	184	44	1,371	811	8	50	59	296.6	9.5	5.9
Craig Colony for																		
Epileptics	11	173	165	1	61	21	1	40	22	11	194	164	1	1	10	202.1	11.5	6.0

MOVEMENT OF PATIENTS IN THE STATE INSTITUTIONS FOR MENTAL DEFECTIVES AND EPILEPTICS DURING THE YEAR ENDED JUNE 30, 1936, AS REPORTED BY SUPERINTENDENTS AND STATEMENT OF CAPACITY AND OVERCROWDING ON JUNE 30, 1936

STATE INSTITUTIONS	Census, July 1, 1935	ADMISSIONS				DISCHARGES							Census, June 30, 1936	Certified capacity	OVERCROWDING IN INSTITUTIONS		
		First admissions	Readmissions	Transfers	Total	Improved	Unimproved	Not mentally defective	Not epileptic	Died	Transferred	Total			Number	Per cent	
State Schools for Mental Defectives																	
Letchworth Village.....	3,144	513	48	5	566	101	38	..	..	36	1	176	3,534	3,120	259	8.3
Newark	2,291	320	30	5	355	76	63	..	..	26	6	171	2,475	1,452	313	21.6
Rome	3,446	345	40	24	409	174	29	..	..	69	8	280	3,575	2,089	-123	...
Syracuse	1,408	143	2	..	145	60	17	..	..	2	3	82	1,471	565	28	5.0
Wassaic	3,550	344	46	25	415	155	46	3	..	55	22	281	3,684	3,540	....	...
Total	13,839	1,665	166	59	1,890	566	193	3	..	188	40	990	14,739	10,766	477	4.4	
Craig Colony for Epileptics.....	2,479	371	28	..	399	65	227	..	2	142	..	436	2,442	1,750	473	27.0	



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